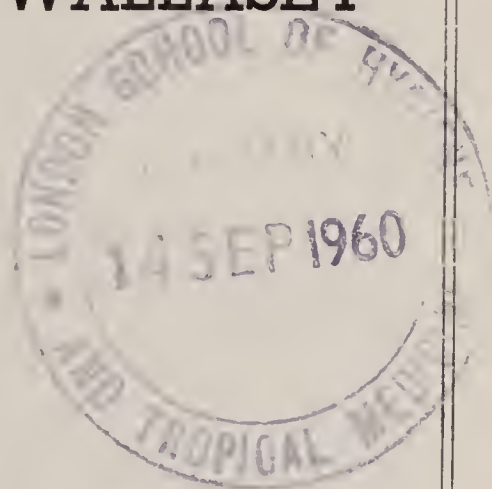


COUNTY BOROUGH OF WALLASEY



ANNUAL REPORT

of the

Medical Officer of Health

and

Principal

School Medical Officer

FOR THE YEAR

1959

HOWARD W. HALL, M.B., Ch.B., D.P.H.

*Medical Officer of Health, Administrative Tuberculosis Officer,
Principal School Medical Officer, etc.*

Including the Report of the
CHIEF PUBLIC HEALTH INSPECTOR
(A. GILPIN, B.SC. (Econ.) M.A.P.H.I., A.M.Inst.F.,
Chartered Fuel Technologist)

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Public Health Department,
Town Hall,
Wallasey.

To The Mayor, Aldermen and Councillors of the County Borough of Wallasey.

I have pleasure in presenting to you the Annual Report on the Health, Welfare and School Health Services of the borough for the year 1959.

Vital Statistics

The birth rate for the borough was 17.85 per 1,000 population as compared with 17.32 in 1958. There were two sets of triplets born in the borough during the year, and I am pleased to report that all six infants survived. There was a slight increase in the infant mortality rate (48 deaths of children under the age of one year in 1959 compared with 44 in 1958) giving a rate of 26.06 per 1,000 live births in 1959, compared with 24.69 in 1958. However, in the case of three of the neo-natal deaths there was a distinct doubt as to their viability. The principal causes of death were prematurity (16) and congenital abnormalities (13). 37 of the 48 deaths took place before the 28th day of life and 29 of the 37 took place before the 7th day of life. The perinatal mortality rate (still births and deaths under one week combined per 1,000 total live and still births) was 37.69 as compared with 38.84 in 1958. Although there is a slight improvement in these figures, there is no room for complacency and the results of the perinatal mortality survey organised on a national level in 1958 are awaited with interest by all working in this field.

Deaths in the borough in 1959 from all causes numbered 1,295 as compared with 1,313 in 1958, giving a death rate of 12.55 per 1,000 population as against 12.76 in 1958. Cancer of the lung accounted for 57 deaths, 7 fewer than in 1958, and coronary artery disease 286, two fewer than in 1958. Deaths from pulmonary tuberculosis numbered eight in 1959 as compared with 13 in 1958.

Infectious Diseases

The year was relatively free from any serious outbreak of infectious disease and I am pleased to report that there was no case of poliomyelitis in the borough. This satisfactory state of affairs may be due to the intensive anti-poliomyelitis vaccination campaign, but it is rather too early to be sure of this. Infective hepatitis, a type of infectious jaundice was fairly prevalent in the borough, and I regret to have to report that this disease accounted for the deaths of two school children.

Health Visiting

The health visiting was more selective throughout the year so that more attention could be given to families with special problems. The health visitors put in much good work in the field of health education.

Home Nursing

I am glad to be able to report an improvement in the staffing position towards the end of the year. In consequence, the nurses have been able to attend more sick old people in their homes in 1959 than in 1958. 29,448 visits were paid to patients of 65 years and over in 1959 as compared with 24,532 visits in 1958.

The clean linen service for incontinent patients started in September and has proved a great help to patients, their relatives and also to the nursing staff.

At the end of October Miss K. Eustace, Superintendent, resigned to take up an appointment with the Lancashire County Council. I should like to record here my appreciation of the efficient manner in which this officer has conducted the Home Nursing Service since the Corporation took over the Wallasey District Nurses in 1950 and wish her well in her new appointment.

Domestic Help Service

The home helps again did yeoman service in the borough during 1959. A total of 78,064½ hours were worked as against 73,922¼ in 1958. Many old people and chronic sick were assisted in their own homes and this often avoided the necessity of admission to hostels or hospital.

Ambulance Service

During the year 33,073 cases were conveyed, an increase of 4,818 over the 1958 figure of 28,255. I am rather concerned about this big increase and appeal to the hospitals in the area, the general practitioners and the general public to use this service in moderation, cutting out all unnecessary journeys. Owing to the pressure on the service, an additional ambulance was ordered during the year.

Mr. Holt, Chief Fire and Ambulance Officer, retired at the end of November and I should like to place on record my appreciation of the good work he has done in the Wallasey Ambulance Service since 1948 and wish him well in his retirement.

Mental Health Service

As mentioned in the Report, the Mental Health Act became law during the year. Much preparatory work has been done, including the drafting of proposals to be submitted to the Ministry incorporating details of the plans for the development of the Community Mental Health Service in the borough. Joint meetings were held with Deva Hospital Medical Board and Deva Hospital Management Committee.

Welfare Services

I am pleased to report the commencement in June of handicraft classes for handicapped persons registered under the scheme for handicapped persons other than blind and partially sighted. In November, a second class was started at Oakenholt Road for the convenience of those living in the Moreton area.

Environmental Health

A full account of the work of the Public Health Inspectors can be found in Part V of this Report, and it is gratifying to note the good progress in slum clearance and the determined and resolute start to the task of giving clean air to Wallasey. There is, however, one other problem in the environmental health field, which has been much in the mind of the public recently, and that is the sewage contamination of the shores and, in particular, of the Marine Boating Lake at New Brighton. Gross contamination occurs following a series of high tides, accompanied by east or north-east winds off the Mersey.

The special committee under Standing Order 40 decided at the meeting on 28th May that the licensee of the marine lake should be given assistance in clearing the lake by the Borough Surveyor's Department, whenever gross contamination takes place. Subsequently, the Council have passed the following resolution "That the discharge of crude sewage into rivers and coastal waters is a medieval practice contrary to amenity and incompatible with the principles of Public Health, and therefore, (a) the Works and Health Committees be requested to consider and report on the establishment of a plant for composting of municipal sewage, sludge, domestic refuse and other similar waste products; (b) consideration be given to the use of Bidston Moss as a site for a composting plant or other sewage treatment works."

On the last day of 1959, the Medical Research Council issued their memorandum No. 37 on Sewage Contamination of Bathing Beaches in England and Wales. This memorandum, although not condoning filthy and aesthetically revolting beaches, does state that the risk to health of bathing in sewage-contaminated sea-water is so small that for all practical purposes it can be ignored.

The records of the notifications of enteric fever and acute poliomyelitis in Wallasey compare favourably with any inland town. In 1959, there were no cases of poliomyelitis notified and the last case of enteric fever occurred in 1954.

For the more discerning residents and visitors, the Council have provided three swimming baths—the old indoor Guinea Gap Baths at Seacombe and two large well-appointed Open Air Pools—the New Brighton Pool and the Derby Pool at Harrison Drive. Details of the inspections and samples taken from the three baths by the Public Health Inspectors are shown on page 95 of the Report.

In conclusion, I should like to thank the members of the Health, General Health and Welfare Committees for their support and sympathetic consideration given to me during the year, the Town Clerk and other Chief Officials of the Corporation for their continued support and advice and all the staff of the department for the vast amount of hard work done throughout the year.

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

(Sgd.) HOWARD W. HALL,

Medical Officer of Health.

PUBLIC HEALTH OFFICERS of the AUTHORITY

Medical Officer of Health and Principal School Medical Officer :

HOWARD W. HALL, M.B., Ch.B., D.P.H.
Town Hall, Wallasey. Telephone No. Wallasey 1600—Ext.120.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer :

WILLIAM F. CHRISTIAN, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health and School Medical Officer :

EDWARD J. A. O'REILLY, M.B., Ch.B., B.A.O. (Obstetrics)

Assistant Medical Officer of Health, School Medical Officer and Medical Supervisor of Midwives :

ESME I. GRANT, M.R.C.S., L.R.C.P.

Tuberculosis Officer (Part-Time) :

JAMES BAXTER, M.B., Ch.B., D.P.H.

Principal Dental Officer :

C. J. LUYA, L.D.S.

Dental Officers (Whole-Time) :

W. A. HENDERSON, L.D.S.

E. G. MASON, L.D.S.

Dental Officers (Part-Time) :

Miss A. P. FARRELL, B.D.S.

L. F. BURROWS, L.D.S., R.C.S.

Chief Public Health Inspector :

A. GILPIN, B.Sc.(Econ.), M.A.P.H.I., A.M.Inst.F. (Chartered Fuel Technologist)

Deputy Chief Public Health Inspector :

A. RIDGWAY

District Public Health Inspectors :

W. H. FARR

D. C. CAHILL (to 14/1/59)

R. HUGHES

R. JONES

I. THOMPSON

J. Q. CALLISTER

L. J. JONES

G. CARR (from 29/6/59)

W. GLADDEN (from 2/11/59)

Milk, Dairies and Meat Inspector and Inspector under Diseases of Animals Acts and Orders :

G. A. OWEN

Shops Inspector :

R. L. BASCOMBE

Superintendent Health Visitor/School Nurse :

Mrs. K. SCHOFIELD

Health Visitors/School Nurses :

Miss E. A. TEGGINS

Miss A. J. EDGE

Miss C. E. MURRELL

Mrs. E. P. NOLAN

Mrs. A. J. SMITH

Mrs. I. D. WINTERBURN

Mrs. W. DOVEY

Miss M. E. ASPINALL

Miss K. E. HIGGINS

Miss E. M. MORGAN

Miss E. WHITBURN

Miss M. B. JONES

Mrs. L. M. JONES

Mrs. M. KEANE

Miss P. REPTON (to 19/4/59)

Municipal Midwives :

Mrs. E. E. HINTON
Mrs. F. E. BOYD
Miss E. HOMER
Miss E. WOODS

Mrs. P. SHACKLADY
Mrs. A. B. TIMEWELL
Miss I. K. PAISLEY
(from 8/1/59)

Chief Weights and Measures and Food and Drugs Inspector :

J. A. W. PRICE, Cert. Board of Trade

Weights and Measures and Food and Drugs Inspector :

J. A. ISHERWOOD, Cert. Board of Trade

Public Analyst (Part-Time) :

TENNYSON HARRIS

Chief Administrative Assistant :

G. A. LOXHAM, D.P.A.

Clerical Staff :

A. YOUNG, D.M.A. (Senior Clerk) (from 16/2/59)	Miss H. J. HARRIS (from 28/12/59)
J. M. GIBSON	Miss E. MASTERS
A. E. LEWIS	Miss P. WITTER
O. M. EDWARDS	Miss B. FISHWICK
N. J. POWER (from 13/7/59)	Mrs. U. DUFFEY (to 18/2/59)
Miss G. BOOTH	Miss G. NASH
Miss M. BLENCOWE	Mrs. J. NICHOLSON
Miss S. LENNOX	Miss A. E. BASCOMBE
Mrs. E. E. BREWSTER (to 1/11/59)	Miss A. ELCOCK
	Miss S. C. PEALING (from 27/4/59)

Part-Time Specialists discharging duties in connection with Special Clinics :

Dr. J. D. ELLIOTT EDWARDS, M.B., Ch.B., D.O.M.S. (Ophthalmic)
Mr. H. DAVIES, M.B., F.R.C.S.(Eng.), Ch.B., Ch.M. (Orthopaedic)

Matrons of Day Nurseries :

Miss E. GREENLY, Central Park Day Nursery
Miss G. E. MORGAN, Oakdale Day Nursery
Miss P. WARNER, Eastway Day Nursery

Superintendent District Nursing Service :

Miss K. EUSTACE, S.R.N., S.C.M., Q.N.S., H.V. Cert. (to 31/10/59)

District Nurses (Whole-Time) :

Mrs. M. PRENDERGAST	Mrs. H. J. THOMPSON (to 15/3/59)
Mrs. S. DUDLEY	Mrs. F. M. PURCELL (to 1/6/59)
Miss B. JOY	Mrs. G. ULYATT (to 15/11/59)
Mrs. K. ELSON	Mrs. M. E. HAMILTON
Mrs. J. DON (from 2/1/59)	(from 1/1/59 to 1/3/59)
Miss M. GOVIER (from 12/1/59)	Mrs. L. CHRIMES
Mrs. M. HAZLETT (from 13/4/59)	(from 1/2/59 to 9/5/59)
Miss H. M. SHEPHERD (from 11/5/59)	Miss O. ELLWOOD
Mrs. D. EVANS (from 21/9/59)	(from 1/2/59 to 31/10/59)
Mrs. E. M. BLEASE (from 5/10/59)	Mrs. L. FRANEY
Miss J. A. OWEN (from 2/11/59)	(from 1/5/59 to 3/11/59)
Miss M. P. MOONAN (from 12/11/59)	Mrs. M. CONLIN
Mrs. V. BLUNT (from 1/12/59)	(from 1/6/59 to 31/10/59)
Miss J. M. GASKIN (from 7/12/59)	Mrs. P. A. BUTLER
Miss S. M. DAVIES (from 7/12/59)	(from 27/7/59 to 30/11/59)
Miss P. STEVENS (to 26/1/59)	

District Nurses (Part-Time) :

Mrs. M. M. KING	Mrs. P. MERRALL
Mrs. I. A. MATTHEWS	(to 31/3/59 & from 29/8/59)
Mrs. C. JONES	Mrs. M. M. WHITE (to 14/1/59)
Mrs. P. A. OWEN (from 6/3/59)	Mrs. D. M. HILL (to 10/3/59)
Mrs. G. WALL (from 12/10/59)	Mrs. M. M. TAYLOR (to 17/6/59)
Mrs. G. ULYATT (from 19/11/59)	Mrs. D. FOSTER (to 31/10/59)
Mrs. P. A. BUTLER (from 1/12/59)	Mrs. V. BLUNT (to 30/11/59)

Domestic Help Organiser :

Mrs. G. M. FALLA

Supervisor Junior Training Centre :

Miss I. P. D. MACDONALD

Mental Welfare Officers :

F. WALL

K. MERCER

Mrs. E. A. BRERETON

Mental Health Worker :

Miss M. V. PHILLIPS (from 2/2/59)

WELFARE SERVICES

Senior Welfare Officer :

R. C. OLLIVE

Welfare Officers :

F. WALL

K. MERCER

Mrs. E. A. BRERETON

Welfare Officer (Handicapped Persons) :

Mrs. W. DAVIES

Handicrafts Teacher (Handicapped Persons) :

Mrs. C. W. GRIFFITH (from 19/5/59)

Home Teachers of the Blind :

Miss A. ROGERS

Miss I. FOGGIN

Clerical Staff :

A. C. HINTON

H. S. FLYNN

Miss D. M. PERKINS

Miss H. J. HARRIS (to 27/12/59)

Miss E. C. BIRCHALL (from 28/12/59)

Matrons of Hostels for the Aged :

Miss E. PARSONS, " Lamorna "

Mrs. A. P. JACKSON, " Redcliffe "

Miss M. ROBERTS, " Newholme "

Warden—Reception Centre :

Mrs. G. CONNOLLY (to 12/10/59)

Mrs. G. M. TEAGUE (from 12/11/59)

PART I.

Vital Statistics, etc.

VITAL STATISTICS

(a) As requested by the Ministry of Health, in accordance with Circular 1/60 : —

	<i>Legitimate</i>	<i>Illegitimate</i>	<i>Total</i>
Live Births—Males	906	32	938
Females	862	42	904
	<hr/>	<hr/>	<hr/>
	1,768	74	1,842
	<hr/>	<hr/>	<hr/>
Live birth rate per 1,000 population			17·85
Illegitimate live births per cent of total live births			4·02
Still Births—Males	19	2	21
Females	19	2	21
	<hr/>	<hr/>	<hr/>
	38	4	42
	<hr/>	<hr/>	<hr/>
Rate per 1,000 total live and still births			22·29
Total live and still births			1,884
	<i>Male Female</i>		
Infant deaths (deaths under one year) ...	21	27	48
Infant Mortality Rates—			
Total infant deaths per 1,000 total live births			26·06
Legitimate infant deaths per 1,000 legitimate live births			26·58
Illegitimate infant deaths per 1,000 illegitimate live births			13·51
Neo-natal Mortality Rate			
(deaths under 4 weeks per 1,000 total live births)			20·09
Early Neo-natal Mortality Rate			
(deaths under one week per 1,000 total live births)			15·74
Perinatal Mortality Rate (Stillbirths and deaths under			
one week combined per 1,000 total live and still births)			37·69
Maternal Mortality (including abortion)—			
Number of deaths			1
Rate per 1,000 total live and still births			0·53

(b) Other details : —

Census population April, 1951	101,369
Registrar General's estimated population at middle	
1959	103,200
	<i>Male Female</i>
Deaths to 31st December, 1959 ...	629 666 1,295
Death rate (unadjusted) per 1,000 of estimated	
population	12·55
Death rate per 1,000 of estimated population adjusted	
by area comparability factor of 1·02	12·80

Death rate per 1,000 of estimated population—	
England and Wales	*11·6
Birth rate per 1,000 of estimated population—	
England and Wales	*16·5
Phthisis death rate per 1,000 of population	0·078
Area in acres as ascertained by Ordnance Survey	
January, 1935	5,961
River and sea frontage	Slightly less than 8 miles
Inhabited houses at 31st December, 1959	30,939
Uninhabited houses at 31st December, 1959	559
Rateable value of the borough as at 31st December, 1959	£1,387,160
Yield of 1d rate 1959/60 (approx.)	£5,538
Estimated yield of 1d. rate 1960/61	£5,611

*Provisional figures

PRINCIPAL CAUSES OF DEATH

Heart Disease	472	Vascular lesions of nervous system	187
Cancer	208	Violent Deaths (including suicides)	42
Respiratory Diseases—			
Pneumonia .. 61	} 136		
Bronchitis 57			
Other 18			

MATERNAL MORTALITY

There was one maternal death of a Wallasey resident during 1959.

SUMMARY OF DEATHS DURING THE YEAR 1959

CAUSES OF DEATH	SEXES		All Ages	DEATHS IN WHOLE DISTRICT							
	M.	F.		0-	1-	5-	15-	25-	45-	65-	75-
Tuberculosis—											
respiratory ...	7	1	8	—	—	—	—	2	1	2	3
Tuberculosis—other ...	—	1	1	—	—	—	—	1	—	—	—
Syphilitic disease ...	2	2	4	—	—	—	—	—	—	1	3
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
Whooping cough ...	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infection ...	—	—	—	—	—	—	—	—	—	—	—
Acute polio-myelitis ...	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases ...	3	1	4	—	—	2	—	—	1	—	1
Malignant neoplasm—stomach ...	11	14	25	—	—	—	—	—	8	7	10
Malignant neoplasm—lung, bronchus ...	44	13	57	—	—	—	—	2	21	26	8
Malignant neoplasm—breast ...	—	15	15	—	—	—	—	—	6	4	5
Malignant neoplasm—uterus ...	—	14	14	—	—	—	—	2	9	2	1
Other malignant and lymphatic neoplasms ...	46	51	97	—	—	—	—	1	34	24	38
Leukaemia, Aleukaemia ...	3	4	7	—	1	2	—	1	1	1	1
Diabetes ...	—	1	1	—	—	—	—	—	—	—	1
Vascular lesions of nervous system ...	76	111	187	—	—	—	—	1	33	43	110
Coronary disease—angina ...	167	119	286	—	—	—	—	3	89	101	93
Hypertension with heart disease ...	11	22	33	—	—	—	—	—	6	10	17
Other heart disease ...	64	89	153	—	—	—	—	5	23	30	95
Other circulatory disease ...	19	16	35	—	—	—	—	1	7	10	17
Influenza ...	10	8	18	—	—	—	1	1	2	6	8
Pneumonia ...	18	43	61	9	1	—	—	1	8	13	29
Bronchitis ...	39	18	57	—	—	—	—	2	15	16	24
Other diseases of respiratory system ...	13	5	18	—	—	1	—	1	4	6	6
Ulcer of stomach and duodenum ...	12	2	14	—	—	—	—	—	4	6	4
Gastro-enteritis and diarrhoea ...	1	4	5	1	—	—	—	—	—	2	2
Nephritis and Nephrosis ...	6	11	17	—	—	—	2	1	5	1	8
Hyperplasia of prostate ...	5	—	5	—	—	—	—	—	1	1	3
Pregnancy, childbirth abortion ...	—	1	1	—	—	—	1	—	—	—	—
Congenital malformations ...	8	8	16	14	—	—	1	—	—	1	—
Other defined and ill-defined diseases ..	46	68	114	24	1	—	1	3	19	18	48
Motor vehicle accidents	5	8	13	—	1	—	2	3	3	1	3
All other accidents ..	10	9	19	—	1	3	—	1	1	4	0
Suicide ...	3	6	9	—	—	—	—	1	4	1	3
Homicide and operations of war ...	—	1	1	—	—	—	—	1	—	—	—
ALL CAUSES ...	629	666	1,295	48	5	8	8	34	305	337	550

INFANT MORTALITY 1959

DEATHS FROM STATED CAUSES IN AGE GROUPS UNDER ONE YEAR

[illegible]

TABLE SHOWING (a) Infant Deaths and Death Rates.
 (b) Neo-natal deaths and Death Rates.
 (c) Deaths and Death Rates (infants 4 weeks to 12 months).

Year	Infants		Neo-natal			4 weeks—12 months		
	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	% of Total Infant Deaths	Deaths	Rate per 1,000 Births	% of Total Infant Deaths
1944	77	43.0	34	19.0	44.16	43	24.0	55.84
1945	97	56.8	38	22.3	39.18	59	34.57	60.82
1946	87	42.2	51	24.7	58.62	36	17.48	41.38
1947	111	51.1	57	26.9	51.35	54	25.09	48.65
1948	78	43.5	38	20.67	48.72	40	22.35	51.28
1949	64	35.8	34	19.0	53.13	30	16.82	46.87
1950	49	28.7	28	16.41	57.14	21	12.31	42.86
1951	55	32.4	35	20.62	63.63	20	11.19	36.37
1952	56	33.3	43	25.62	76.78	13	7.75	23.22
1953	41	24.7	29	17.51	70.74	12	7.25	29.26
1954	43	25.1	29	16.94	67.44	14	8.12	32.56
1955	41	25.4	29	17.96	70.74	12	7.44	29.26
1956	42	24.07	31	17.77	73.81	11	6.30	26.19
1957	48	26.10	33	17.94	68.75	15	8.16	31.25
1958	44	24.69	32	17.96	72.73	12	6.73	27.27
1959	48	26.06	37	20.09	77.08	11	5.97	22.92

TABLE SHOWING the Infantile Mortality rates of the Borough as compared with the figures for the whole of England and Wales for the census years from 1901 to 1951 and consecutive years to 1959.

Deaths under 1 year per 1,000 Live Births, England and Wales.

<i>Year</i>	<i>Wallasey</i>	<i>England and Wales</i>
1901	142.0	151
1911	109.0	130
1921	59.0	83
1931	44.8	66
1941	78.9	60
1951	32.4	29
1952	33.3	27
1953	24.7	27
1954	25.1	25
1955	25.4	25
1956	24.07	24
1957	26.10	23
1958	24.69	23
1959	26.06	*22

* Provisional

ILLEGITIMACY

During the year there were 74 illegitimate births recorded by the Registrar-General as belonging to the borough, compared with 80 in 1958. This gives an illegitimate birth-rate of 40.17 per thousand total live births, as compared with 44.89 in 1958.

There was one death of an illegitimate infant during the year 1959.

ECONOMIC CONDITIONS

The number of unemployed persons in the borough in January, 1959 was 1,800 and in December, 1,535, as compared with 1,246 and 1,474 respectively in January and December, 1958.

The following amounts were expended on Unemployment etc., Benefit by the Wallasey Employment Exchange :

Unemployment Benefit £147,071

Assistance Allowances £64,744

The number of persons on the Unemployment Register normally starts to diminish in February each year, until July, when it is at its lowest. The figures for July, 1958 were 1,033 and for July, 1959, 1,214.



PART II.

*Occurrence and Control
of Infectious Diseases*

CASES OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES NOTIFIED IN WALLASEY DURING 1959

NOTIFIABLE DISEASES	Totals	Cases notified at ages										
		under 1	1	2	3	4	5-9	10-14	15-24	25-44	45-64	65 & over
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	27	—	2	—	—	—	5	4	6	8	2	—
Dysentery	33	1	2	8	1	3	4	2	7	3	—	2
Diphtheria (including Membranous Croup)	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	5	—	—	—	—	—	—	1	—	1	—	3
Scarlet Fever	84	—	—	5	5	9	54	11	—	—	—	—
Paratyphoid	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	21	—	—	—	—	—	—	—	12	9	—	—
Meningococcal Infection	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis (Paralytic)	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis (Non-Paralytic)	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	35	—	—	—	—	1	—	1	—	8	14	11
Ophthalmia Neonatorum	5	5	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	70	—	2	2	—	1	1	—	20	15	24	5
Other forms of Tuber- culosis	14	—	—	1	—	—	—	3	3	2	3	2
Measles	477	17	59	68	79	68	182	3	—	1	—	—
Whooping Cough	53	7	4	6	5	10	19	—	1	1	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—
Post Infectious Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
Acute Infective Encephalitis	1	—	—	—	—	—	1	—	—	—	—	—
Polio-Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	825	30	69	90	90	92	266	25	49	48	43	23

INFECTIOUS DISEASES — INVESTIGATIONS AND VISITS OF SURVEILLANCE

During the year a total of 1,620 visits were made by the health visitors and public health inspectors to infectious cases and contacts, as follows :—

	<i>Enquiry visits</i>	<i>Visits of Surveillance</i>	<i>Total visits</i>
Health Visitors	771	221	992
Public Health Inspectors ...	165	463	628
	<hr/> 936	<hr/> 684	<hr/> 1,620

A total of 733 specimens were submitted to the Public Health Laboratory in connection with the occurrence of cases of food poisoning, dysentery and meningococcal infections.

Diphtheria

For the fourth year in succession there were no cases of diphtheria notified.

The following table shows the number of notifications, confirmed cases and immunisations each year since 1934 :—

<i>Year</i>	<i>Notifications</i>	<i>Confirmed Cases</i>	<i>Number Immunised</i>	<i>Deaths</i>
1934	258	241	—	25
1935	275	239	181	18
1936	259	227	889	12
1937	241	209	451	12
1938	255	235	657	13
1939	187	185	110	11
1940	143	128	230	5
1941	220	182	951	10
1942	312	223	3,490	12
1943	157	79	2,263	3
1944	109	59	1,257	3
1945	120	66	1,411	1
1946	96	52	1,291	*1
1947	29	8	1,028	*1
1948	27	13	1,459	†3
1949	14	14	1,208	—
1950	11	6	1,301	—
1951	6	5	1,328	—
1952	7	3	1,321	—
1953	14	10	1,120	*1
1954	5	3	1,483	—
1955	3	2	1,325	—
1956	—	—	1,357	—
1957	—	—	1,084	—
1958	—	—	1,449	—
1959	—	—	1,009	—

*Not immunised, †2 not immunised and 1 inward transfer,

The fall in the incidence of diphtheria is shown by the following table of corrected notifications and deaths for England and Wales since 1944 :—

<i>Year</i>	<i>Deaths</i>	<i>Corrected Notifications</i>
1944	934	23,199
1945	722	18,596
1946	472	11,986
1947	244	5,609
1948	156	3,575
1949	84	1,890
1950	49	962
1951	33	664
1952	32	376
1953	23	266
1954	9	173
1955	13	155
1956	8	53
1957	6	37
1958	8	80
1959	1	103

It will be noted that there has been an increase in the number of notifications during 1959.

The importance of parents having their children immunised against diphtheria cannot be over-emphasised.

Scarlet Fever

84 cases of scarlet fever were notified during 1959 compared with 134 cases in 1958 and 88 in 1957. There were no deaths.

Puerperal Pyrexia

There were 21 notifications of puerperal pyrexia during the year, none of which proved fatal.

Ophthalmia Neonatorum

5 cases of ophthalmia neonatorum were notified during the year. All were mild non-gonococcal cases.

Whooping Cough

53 cases were notified during the year. Of these 21 children had received a full course of immunisation against whooping cough : six children had received one injection only and one had received two injections only. No cases were fatal. During 1959 a total of 982 children were immunised.

Measles

There were 477 cases of measles notified during 1959 compared with 543 in 1958. There were no deaths.

Typhoid and Paratyphoid Fever

No cases of typhoid or paratyphoid fever were notified during 1959.

Food Poisoning

During the year 27 cases of food poisoning were confirmed. The cases are summarised as follows :—

3 outbreaks with four cases in each household ;

1 outbreak with two cases in the family ;

A nursery school outbreak in which four people were infected.

In the remaining 9 cases only one member of each household was infected.

The causative agent in 20 cases was salmonella typhimurium ; in one case salmonella enteritidis ; and in six cases involving two outbreaks the agent was not ascertained.

Dysentery

There were 33 confirmed cases of sonne dysentery during the year. 91 enquiries and 168 visits of surveillance were made by health visitors and public health inspectors. 224 specimens were submitted to the Public Health Laboratory for pathological examination. All cases were kept under surveillance until three consecutive specimens were found to be free from pathogenic organisms.

Poliomyelitis

No case of acute poliomyelitis occurred during the year.

Meningitis

No case of meningitis occurred during the year

Smallpox

No case of smallpox occurred during the year.

Infective Hepatitis

This virus infection characterised by jaundice was prevalent in the borough throughout the year. 81 cases came to the notice of the Health Department. From an analysis of the 81 cases investigated, the infection would appear to have been Virus "A." As can be seen in the table below the main incidence was in the school population.

<i>Age Groups</i> —0-4 yrs.	5-9 yrs.	10-14 yrs.	15-19 yrs.	20 yrs.& over	<i>Total</i>
8	38	21	3	11	81

Unfortunately there were two fatal cases ; one a boy aged $6\frac{3}{4}$ years and the other a girl aged $7\frac{3}{4}$ years.



PART III.

Services provided under Part III of The National Health Service Act, 1946.

Section 21—Health Centres.

- „ 22—Care of Mothers and Young Children.
- „ 23—Midwifery Services.
- „ 24—Health Visiting.
- „ 25—Home Nursing.
- „ 26—Vaccination and Immunisation.
- „ 27—Ambulance Service.
- „ 28—Prevention of Illness—Care and After-Care.
- „ 29—Domestic Help Service.
- „ 28 and 51—Mental Health Services.

Services provided under Part III of The National Health Service Act, 1946.

SECTION 21 — HEALTH CENTRES

No Health Centres have been constructed or are in course of construction in Wallasey.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Clinics

These clinics are held as follows :—

(a) The Midwives' Clinics :

Alternate Mondays at Merton Road from 2 p.m. to 4 p.m.
Alternate Monday evenings at Water Street 6 p.m. to 7 p.m.
Tuesday evenings Water Street 6 p.m. to 7 p.m.
Thursday evenings, Moreton Clinic 6 p.m. to 7 p.m.

The following are details of attendances during 1959 :—

	<i>Sessions held</i>	<i>Expectant Mothers attending</i>	<i>No. of attendances</i>
Water Street	51	138	667
Merton Road	49	161	620
Oakenholt Road	51	227	812
	<hr/> 151	<hr/> 526	<hr/> 2,099

(b) The Assistant Medical Officer of Health's Clinics :

Water Street and Merton Road—Alternate Mondays at 1-45 p.m.
Moreton Clinic—3rd Friday in the month at 1-45 p.m.

The following are details of attendances during 1959 :—

Expectant mothers on books at January 1st	12
New cases during the year	61
Names on books at December 31st	24
Attendances of Expectant Mothers	128

Under the National Health Service, the majority of expectant mothers book their own doctors now, as well as a midwife, for home confinements, and they attend both for their ante-natal care.

Thus, only a few patients remain who are not catered for in this way, and these attend the Assistant Medical Officer of Health's Clinic, as do those who require a blood test, which is an essential part of ante-natal care these days.

The midwives work well with the general practitioners and notify them of any abnormality they may detect. When possible, and if requested by the family doctor, the midwife attends the doctor's surgery, by appointment, with her patient, and a joint consultation is held which is of benefit to all three.

We continue to hold relaxation classes at Water Street and Moreton clinics. These are supervised by the physiotherapist and the midwives, and although the numbers who attend are, of necessity, limited, because of space, time and equipment, an opportunity is afforded for discussion and friendly chats on mothercraft and we hope that these give confidence and reassurance to the younger mothers. During 1959 72 sessions were held.

I am still of the opinion that the old type of local health authority's ante-natal clinic where mothers attended regularly every fortnight, and were followed up if they did not, was preferable to the present method. The majority of general practitioners are too busy to hold special clinics for expectant mothers and, therefore, they have to attend at an ordinary surgery which is not altogether satisfactory.

It is unfortunate that some of those young expectant mothers, who attend their doctor's surgery, and Highfield ante-natal clinic only, miss the health education provided at the local health authority's ante-natal clinic.

An offer was made of a health visitor to attend the Highfield ante-natal clinic, but this, owing to the very poor accommodation, was turned down.

Post-Natal Clinics

8 mothers attended for post-natal examination during the year, making 8 attendances. In addition the health visitors and midwives encourage and stress the importance of mothers attending for post-natal examination by their own doctors.

Care of Premature Babies

The Midwives, Health Visitors and Maternity Hospitals work in close liaison with each other to ensure that premature infants receive the correct care and attention in the home.

The Maternity Hospitals notify the Department of premature births, so that the delay between the date of discharge and the date of the health visitor's first call is as little as possible.

Home Helps are provided when necessary in cases where premature infants are born at home.

The following table gives details of premature live births during the year :—

Weight at birth	Premature Live Births															Still-Births Premature		
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
3 lb. 4 oz. or less (1,500 gms. or less)	20	6	6	—	—	—	1	—	1	—	—	—	—	—	—	15	2	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	22	1	17	3	—	3	1	—	1	—	—	—	—	—	—	5	—	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	23	1	20	4	—	4	1	—	1	—	—	—	—	—	—	2	—	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	53	1	51	16	—	16	—	—	—	—	—	—	—	—	—	1	—	—
Totals ...	118	9	94	23	—	23	3	—	3	—	—	—	—	—	—	23	2	—

There were 16 deaths during the year, where the cause was given as prematurity.

The Public Health Department has scales which can be had on loan for weighing premature babies in the homes. No charge is made. Fifty-four parents took advantage of this service during the year.

The Health Visitors attended 41 Saturday morning sessions at Dr. Farquhar's premature baby clinics at Highfield during the year.

Perinatal Mortality

This term has been coined in recent years to apply to stillbirths and deaths in the first week of life. These factors operating during pregnancy to cause stillbirths, will also result in some babies being born alive but dying shortly after birth. It was, therefore, felt that these deaths should be added to the stillbirths if a true picture is to be obtained of the effects of these factors.

This has been done in the table given below, and shows the relative importance of the different factors which are responsible for the deaths in question. As none of the cases have been listed under more than one heading, those cases where more than one factor was responsible have been allocated to the group considered to be of major importance as the cause of death. For example, some of the

cases listed under multiple births — a well recognised hazard — could also have been included in the group “hazards of labour” where the foetus was viable and alive up to the time of labour, or could have been listed under the prematurity group. However, if cases were to be entered more than once on the table, it would not provide such a clear representation of the relative importance of the factors listed.

PERINATAL MORTALITY TABLE

<i>Group</i>	<i>Factors causing Stillbirths</i>	<i>Factors causing deaths during first week</i>	<i>Total</i>
A. Maternal Causes			
Toxaemia & Hypertension ...	6	2	8
Maternal stress or injury to mother	1	2	3
Prematurity	2	2	4
Mature (cause unknown) ...	1	—	1
Post Maturity	1	—	1
Placenta Insufficiency	2	1	3
Maternal Disease	2	1	3
Ante-partum haemorrhage ...	7	4	11
Hazards of labour, e.g. cord round neck ; prolapsed cord	3	1	4
Maternal Infection	0	1	1
		(toxoplasmosis)	
B. Foetal Causes			
Congenital Deformities	8	7	15
Multiple births	5	6	11
Rhesus factor	2	2	4
Totals ...	40*	29	69

* In addition, two stillbirths from 1958 were registered by the Registrar General in 1959.

As will be seen from the above table “Congenital Deformities” was the highest factor. Further details are given below :—

Anencephalics	6
Congenital Heart Disease	1
Congenital Abnormality of Mesentery	1
Hydrocephalus	1
Hydrocephalus and Spina Bifida	1
Lung Atelectasis	1
Lung Cyst	1
Oesophageal Atresia	2
Spina Bifida	1
	<hr/> 15 <hr/>

Child Welfare Clinics

The National Health Service has been responsible for many changes in the pattern of the Local Authority's Health Service, but as far as the Child Welfare Clinics are concerned, there is little change, and their popularity in Wallasey remains unaltered, with numbers that are very gratifying.

It is largely due to the efforts of the health visitors, when they make their first birth visits to the home, that such a large number of mothers attend the clinics so soon after the birth of their babies, and so regularly.

All new babies are seen by the doctor and thoroughly examined, and detailed advice is given with regard to feeding and general management. Young mothers with their first babies are very anxious to unburden their worries and difficulties and they express themselves greatly relieved and re-assured after they have had a chat with us about these problems. They come week after week during the first few months and it is usually only the worst of weather conditions, or illness, that keeps them away.

If the child is late in teething, or sitting up, or walking, the mother can find out from the doctor or health visitor if there is any need to worry.

Advice is given on mixed feeding: when to introduce it, how to do it and what to give. All babies are not alike, and though some will take solids at a very early age, and never turn a hair, others require much more coaxing, and refuse to take anything off a spoon, until they are quite old.

Habit training is another difficult problem with some children. Mothers sometimes despair of ever getting their babies clean and dry and this is another hurdle we can help them over with our advice and treatment.

Immunisation against diphtheria, whooping cough and tetanus, in one serum, is offered at the welfare clinics at the age of 4—6 months, allowing time for vaccination against smallpox to be done first. Unless the family doctor has expressed a wish to do it himself, the mother is very pleased to take advantage of this service at the clinic in the course of her regular visits — she can thus kill two birds with one stone, as it were. Syringes and needles are carefully sterilised, and always ready for action, and the serum is kept in the refrigerator at the correct temperature. When this has been completed, the mother is encouraged to register her baby for "polio" inoculation, so that, if possible, by 12 months of age, the child will have received protection against smallpox, diphtheria, whooping cough, tetanus and poliomyelitis.

The toddlers' clinics are held twice a month at Moreton and many mothers seem to appreciate this opportunity of a pre-school medical examination. The children are sent for at the age of 2, 3 and 4 years of age, and it is at this early age that many incipient defects can be detected and nipped in the bud.

The clinic at Leasowe Hospital is quite well-established now, but the attendance there depends a great deal on the weather con-

ditions, on Wednesday afternoons. It is not an ideal place for a clinic, and can be very bleak and cold on a wintry afternoon. We shall welcome the new clinic when it finally materialises, and I am sure the numbers will jump considerably when it opens. We still have a few problem families in Leasowe and it is uphill work for the health visitor to gain their confidence and be accepted as a friend, and not as an enemy.

A cup of tea and a biscuit is served at some of the clinics and the mothers enjoy this, whilst chatting to others, and comparing notes about their babies.

I should like to thank our voluntary helpers who come along so regularly, and relieve the health visitors of some of the less specialised jobs, thereby allowing them more time to circulate among the mothers giving them advice.

The Clinics at which a doctor attends on each occasion are held in the afternoon of the following days :—

Health Clinic, Water Street	Tuesdays
Health Clinic, Oakenholt Road, Moreton ...	Tuesdays
Parish Hall, Wallasey Village	Wednesdays
Trinity Church Hall, Manor Road	Thursdays
Congregational Church Hall, Princess Road	Thursdays
Leasowe Children's Hospital	1st, 2nd and 4th Wednesday in month

The number of attendances during the year was :

	Water Street	Moreton	Princess Road	Wallasey Village	Trinity Hall Liscard	Leasowe Hospital	Totals
Children under one year of age	1,941	3,173	2,718	2,678	1,755	500	12,765
Children between one and five years	885	828	1,028	987	890	226	4,844

Toddlers' Clinic

Number of Sessions held	24
Number of children called up	600
Number who attended	275*

(*This number is included in Moreton Child Welfare Clinic figures)

Distribution of Welfare Foods

Welfare foods, i.e., National dried milk, cod liver oil, orange juice and vitamin tablets were distributed from the following points during the year :—

25a Liscard Village ; Health Clinic, Moreton ; Water Street Clinic, and at the clinics held in Wallasey Village Parish Hall, Princess Road Church Hall and Leasowe Hospital.

The following table shows the amounts of welfare foods which have been distributed during the years 1955 to 1959 inclusive :—

	1955	1956	1957	1958	1959
NATIONAL DRIED MILK					
Number of packets given free ...	283	506	512	695	1,244
„ „ sold ...	48,569	46,644	38,127	31,110	29,125
COD LIVER OIL, FRUIT JUICES, ETC.					
Number of bottles of:					
Cod Liver Oil ...	12,672	11,154	9,252	5,257	5,168
Vitamin Capsules ...	4,773	5,313	5,150	4,539	5,022
Orange Juice (Free) ...	445	487	624	65	2
„ „ (Sold) ...	75,327	78,823	81,771	48,139	47,842

During the year the number of packets of dried milk (other than National dried milk), cereals, etc., sold at the Clinics was 15,882 realising a total of £2,012 10s. 5d.

Priority Dental Services

The following tables give particulars with regard to the dental care of expectant and nursing mothers, and children under school age :—

- (a) Number of officers employed at the end of the year on a salary basis in terms of wholetime officers to the maternity and child welfare service.

1. Principal Dental Officer	$\frac{1}{8}$ th
2. Dental Officers	$\frac{1}{4}$

- (b) Number of officers employed at the end of the year, on a sessional basis, in terms of wholetime officers to the maternity and child welfare service $\frac{1}{16}$ th

- (c) Number of dental clinics in operation during the year 4

- (d) Number of sessions (i.e., equivalent complete half days) devoted to maternity and child welfare patients during the year 70

NUMBERS PROVIDED WITH DENTAL CARE :—

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	93	87	87	51
Children under Five	259	212	203	202

FORMS OF DENTAL TREATMENT PROVIDED

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radio-graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers	20	86	—	—	258	42	17	7	—
Children under Five	—	21	—	—	252	179	—	—	—

Day Nurseries

There is no doubt that those children who attend the nurseries regularly derive considerable benefit from the physical and mental care they receive from our well-trained and kindly nursery staff.

They are happy and contented within about 24—48 hours of their admission, and it is extremely rare for a child not to settle down within that period.

The regular well-balanced meals and daily rest that these children have does a lot to compensate them for the absence of their mother during the day.

The day is very full and they are lively and active. It is interesting to watch them at play and quite surprising to find that boys enjoy playing at “mothers and fathers” and doing housework and cooking as much as the girls. They all get plenty of exercise and love scrambling up and down the commando net, the climbing frame, and the indoor chute; then there is water and sand play, painting, drawing, hammering, and dressing up.

They have a thorough medical examination every three months, or oftener, if necessary, and all the children are immunised against diphtheria, whooping cough, tetanus and “polio,” in the nursery, by the Assistant Medical Officer of Health.

Two of the nurseries are training schools for the Diploma of the National Nursery Examination Board, and six students are in training all the time. These girls are very keen and make good nursery nurses. Part of their training is done in conjunction with Birkenhead and they go to the Birkenhead Technical College two days per week for lectures by the course tutors. Most of our girls are successful at their first attempt and we usually manage to find suitable vacancies for them when they have obtained their Diploma. It is an excellent training for future mothers, and these young girls handle babies with accomplished ease and dexterity. Motherhood will hold no fears for a nursery-trained nurse when she gets married.

At the present time, Eastway Day Nursery obtains its dinners from the school canteen, but this is not altogether satisfactory, and we hope soon to start cooking all the meals in the nursery. This will result in a greater variety of menus, and more suitable food being available for the younger children.

Details of attendances during the year are as follows :—

Nursery	Number on Register 31/12/59	Number of Places	Average Daily Attendances	
			0—2's	2—5's
Eastway	27	30	5.5	13.1
Central Park	51	50	14.1	18.4
Oakdale	44	50	8.8	26.1

Mother and Baby Homes

There is not a sufficient number of mothers seeking admission to such homes to justify the Council maintaining a Home for this purpose.

Contributions are made where necessary to the maintenance of unmarried mothers and illegitimate children admitted to suitable mother and baby homes.

During 1959 contributions were made in respect of nine cases. The department works in close liaison with the Wallasey Moral Welfare Association, the Birkenhead and Wirral Moral Welfare Association and the Chester Diocesan Board of Moral Welfare.

Nurseries and Child Minders Regulations Act, 1948

No applications for registration of premises were received. One Day Nursery was on the register at the end of the year.

Routine inspections were made and advice given.

SECTION 23 — MIDWIFERY SERVICES

Domiciliary Midwifery

Dr. E. I. Grant, Assistant Medical Officer of Health and Medical Supervisor of Midwives makes monthly inspections, and reports as follows :—

“ The administration of the domiciliary midwifery service is a constant source of worry and anxiety to its supervisors. There are still seven midwives and during 1959 there was an unprecedented amount of sickness amongst them ; at times there were only three on duty, four being off sick, and it became very difficult to maintain a satisfactory service without seriously overworking and curtailing the off-duty of those who remained at their posts.

It was especially difficult to maintain an adequate service through the night when so many calls are made on the midwife, and we were fortunate in being able to recruit the services of an extra practising midwife who was willing to act as relief in the event of an emergency. Unfortunately, she is not on the telephone and we had to make use of the ambulance depot who assisted us by notifying her when she was required. This was done in accordance with a Ministry instruction which said that every possible expedient must be taken to ensure that the remaining midwives were able to take their off-duty and holidays.

It has not been found possible at the moment to make any changes in the local authority's arrangements with regard to a night rota system, as suggested in the Minister's Circular 1/60, because the number of midwives employed makes this impracticable. As mentioned above, however, we are able to call on this relief midwife if there is an undue amount of sickness, or during the holiday periods.

NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR

	DOMICILIARY CASES					
	Doctor not booked		Doctor booked		Totals	Cases in Institutions
	Doctor present at time of delivery of child (2)	Doctor not present at time of delivery of child (3)	Doctor present at time of delivery of child (either the booked Doctor or another) (4)	Doctor not present at time of delivery of child (5)		
(1)					(6)	(7)
(a) Midwives employed by the Authority	—	2	287	197	486	—
(b) Midwives employed by Voluntary Organisations:—						
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	—	—	—	—	—	—
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—	—	—	—
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	—	—	—	1,134
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	—	—	—	—	—	—
Totals ..	—	2	287	197	486	1,134

It is not surprising that there is a shortage of domiciliary midwives — their work, though undoubtedly rewarding, is very arduous, and it is not very pleasant to be on call 24 hours out of the 24, even though their off-duty periods are quite generous, when they are able to take them.

Our midwives are loyal, conscientious women, but they are not getting any younger, and are prone to sickness during the winter just like anyone else. We do everything we can to divide the work equally, but when there is sickness, the extra duties, whether it be nursings or deliveries, often fall heavily on those who remain at their posts.

Particularly, in Moreton and Leasowe, where the districts are large and scattered, another car would be most valuable to render the midwife more mobile, or, better still, an additional midwife to act as relief.

In addition to their deliveries and nursings, the midwives have to attend their ante-natal clinics once or twice a week, and have to keep their registers and weekly returns up to date. One midwife attended a Refresher Course in 1959, and three will be going in 1960.

I should like to take this opportunity of thanking Mrs. Schofield, Superintendent Health Visitor, for the assistance she has given me, and for all the work she has done in connection with the day-to-day administration of the midwifery service — it is no easy task for either of us."

In 1959 the seven municipal midwives attended 486 cases, of these 287 were attended as maternity nurses. Further details are given in the table on page 34.

Medical aid, under Section 14(1) of the Midwives Act, 1951, was not sought in any of these cases.

One midwife notified her intention to practise privately during 1959 but did not attend any cases.

Maternity Outfits

Maternity outfits are supplied free of charge on request to the Public Health Department, or to the midwife in attendance for all domiciliary confinements.

The number of maternity outfits issued during the year was 525.

Maternity Emergency Unit

The Corporation has an arrangement with St. Catherine's Hospital, Birkenhead, for the use in Wallasey of the Maternity Unit "Flying Squad" for dealing with difficult domiciliary obstetric emergencies.

It was not necessary to call upon the services of the Unit during 1959.

Maternity Homes

There are no private maternity homes registered in the borough.

SECTION 24 — HEALTH VISITING

For the greater part of 1959 (i.e. from April to December) the staff has been short by one health visitor, but fortunately it was possible to employ a qualified health visitor on a part-time basis.

The terms of reference of the Working Party on Health Visiting which reported in 1956 were :—

“to advise on the proper field of work, the recruitment and training of health visitors in the National Health Service and School Health Service.”

The Working Party decided that ideally 10,300 were needed in England and Wales, i.e. on an average one health visitor to 4,300 population. As the population of Wallasey County Borough is 103,200 approximately, I estimate our requirements to be 24 health visitors. At present there are thirteen full-time qualified health visitors, one part-time school nurse, and two tuberculosis health visitors. The work, however, increases by the addition of extra duties and although health education is much to the fore in our minds, their time is limited.

Three of the staff attended Refresher Courses this year.

One attended a Course organised by the Royal College of Nursing at Birmingham concerning Mental Health, from 5th to 10th January, 1959.

The Superintendent Health Visitor attended a Superintendent's Course at Manor Hall, Bristol, from 9th to 16th April, which included aspects of Health Education.

One health visitor attended a Course on “Confidence in Family Life” at Homerton College, Cambridge, from 18th July to 1st August. The staff are grateful to the Health Committee for giving them the opportunity to attend such interesting courses which they find most helpful in their work.

The health visitors continue to visit babies and young children advising on feeding and general management. They look on each family as a complete unit and take an interest in every member whether an ante-natal mother or a grandmother. The aim is the promotion of good health, including good mental health, in the home.

Problem families will always be a concern of the health visitors who try to help them as much as their time allows. In tackling these families it is most important that there should be full liaison between all departments of the Corporation which are concerned.

The following is a summary of work done by the Health Visitors during the year :—

Total visits to children under 1 year	...	...	...	...	...	8,659
Total visits to children between 1 and 5 years	...	...	...	...	...	13,328
Total visits to Premature Births	...	...	...	...	...	211
Total visits re Stillbirths	...	...	...	...	...	36
Total visits re Neo-Natal Deaths	...	...	...	...	...	34
Total visits re Infant Deaths	...	...	...	...	...	14
Total visits re Infectious Diseases and contacts	...	...	...	...	...	764
Total visits to Dysentery cases	...	...	...	...	...	228

Total visits to Ophthalmia cases	...	...	...	...	...	...	5
Total visits to Day Nurseries	...	...	...	...	...	...	52
Total visits re Immunisation	...	...	...	...	...	...	51
Total visits for Children's Officer	...	...	...	...	...	...	13
Total visits re Adoptions	...	...	...	...	...	...	13
Total visits for Hospital Almoners	...	...	...	...	...	...	6
Total visits to Expectant Mothers	...	...	...	...	...	...	1,317
Total visits to Post-Natal cases	...	...	...	...	...	...	330
Total visits re Tuberculosis	...	...	...	...	...	...	1,695
Total visits to Diabetics, per General Practitioners	...	...	...	...	...	...	4
Total visits re Care of Old People	...	...	...	...	...	...	469
Miscellaneous visits	...	...	...	...	...	...	1,101
							<hr/> 28,330
Ineffectual visits (no response, etc.)	...	...	...	...	...	...	3,380
							<hr/> 31,710
Attendances at Junior Training Centre for :—							
Medical Inspections	...	...	...	...	...	...	11
Cleanliness Surveys	...	...	...	...	...	...	1
							<hr/> 12
							<hr/>
Attendances in School re B.C.G. vaccination	...	...	...	...	...	...	—
Attendances in School by T.B. Health Visitors re B.C.G. vaccination	...	...	...	...	...	...	121
Home visits re B.C.G. vaccination	...	...	...	...	...	...	52
							<hr/> 173
							<hr/>
Attendances at Birkenhead Children's Hospital	...	...	...	...	...	...	44
Attendances by T.B. Health Visitors at Mill Lane Chest Clinic	...	...	...	...	...	...	81

SECTION 25 — HOME NURSING

Although there was a great shortage of nursing staff at the beginning of the year, the position had greatly improved by the end of 1959. The establishment during the year was one Superintendent and nineteen nurses.

Messages are taken at the Nursing Centre from 8 a.m. to 9 p.m. daily, and from 9 a.m. to 9 p.m. on Sundays. One nurse is on duty each evening for emergency calls and late evening visits to very ill patients.

The draw sheet service for incontinent patients has proved a great help to patients, their relatives, and also to the nursing staff.

The Oxford Hoist provided has greatly benefited the nurses in the lifting of heavy patients

During the year fifteen new Raleigh Mopeds were purchased.

To celebrate the Centenary of District Nursing, the Superintendent and three nurses attended a review by Her Majesty The Queen Mother, at Buckingham Palace on the 1st July.

The following is a summary of the work carried out by the District Nursing Service in 1959 :—

TABLE SHOWING TOTAL COMPLETED CASES NURSED, AVERAGE DURATION OF TREATMENT, AND AVERAGE NUMBER OF VISITS FOR VARIOUS TYPES OF DISEASE DURING 1959.

Disease	Completed cases	Percent- age of total	Average duration of treat- ment (weeks)	Average number of visits
Infectious, etc.	2	.2	2.7	30.0
Tuberculosis (all forms)	49	3.9	12.5	66.8
Cancer and other neoplasms	104	8.2	7.0	48.1
Diabetes	30	2.4	32.2	101.6
Mental and nervous	32	2.5	10.1	54.1
Ear, eye, nose, throat and other sense organs	20	1.6	4.0	34.6
Cerebral haemorrhage, cerebral thrombosis, hemiplegia, etc.	95	7.5	11.0	52.2
Heart and arteries	84	6.6	10.2	38.6
Veins and circulatory	37	2.9	6.4	25.1
Respiratory	121	9.6	3.1	16.4
Digestive (including intestinal)	199	15.7	3.5	9.7
Genito-urinary system	42	3.3	5.1	21.9
Pregnancy	16	1.3	2.1	14.4
Skin (including septic conditions)	59	4.7	12.5	49.4
Bones and joints and muscular conditions (including rheumatism)	46	3.6	32.0	121.5
Injury	54	4.3	7.5	27.0
Blood... ..	20	1.6	4.7	9.7
Glands	1	.1	.3	3.0
Diagnostic (preparation for X-Ray, etc.)	126	10.0	.4	2.1
Senility	95	7.5	9.4	31.4
Other or ill-defined	32	2.5	3.2	19.4
Total	1,264	100.0	7.6	34.0

Visits to Patients.

	Cases	Visits
Medical	1,076	36,007
Surgical	204	6,117
Tuberculosis	63	3,850
Infectious	2	60
Maternal Complications	16	231
Others	126	258
Totals	1,487	46,523
Patients included in above who were 65 years or over at the time of first visit	902	29,448
Children included in above who were under 5 years at the time of first visit	17	156
Patients who have had more than 24 visits during the year	442	37,219

The above figures include 6,839 visits paid to 206 patients for the purpose of giving injections only.

Disease	Recovered, Relieved or Convalescent	Admitted to Hospital or Nursing Home	Died	Specific Treat- ment completed or discontinued	Other Causes*	Total
Infectious, etc. ...	1	1	—	—	—	2
T.B. (all forms) ...	14	4	—	4	27	49
Cancer and other neo- plasms ...	16	26	56	—	6	104
Diabetes ...	2	12	2	—	14	30
Mental and nervous ...	9	18	2	—	3	32
Ear, eye, nose, throat and othersenseorgans	13	3	—	—	4	20
Cerebral haemorrhage, cerebral thrombosis, hemiplegia, etc. ...	20	33	31	—	11	95
Heart and arteries ...	21	22	22	2	17	84
Veins and circulatory ...	14	9	10	—	4	37
Respiratory ...	83	18	11	3	6	121
Digestive (including intestinal) ...	141	41	4	5	8	199
Genito-urinary system	27	7	4	—	4	42
Pregnancy ...	14	—	—	2	—	16
Skin (including septic conditions) ...	32	16	1	—	10	59
Bones and joints and muscular conditions (including rheumatism)	15	22	1	—	8	46
Injury ...	33	16	2	—	3	54
Blood ...	5	2	1	1	11	20
Glands ...	—	1	—	—	—	1
Diagnostic (prepara- tion for X-ray, etc.)	—	—	—	126	—	126
Senility ...	22	27	34	—	12	95
Other or ill-defined ...	17	4	5	—	6	32
Total cases ...	499	282	186	143	154	1,264

* "Other causes" include cases where relatives are able to manage, treatment has been refused by patients, reduction of case load, case left District, etc.

NURSING HOMES

There were 3 Nursing Homes on the Register at the end of 1959. 20 deaths occurred in the Homes during the year.

15 visits were paid to the Nursing Homes by the Superintendent Health Visitor.

SECTION 26 — VACCINATION AND IMMUNISATION

Smallpox Vaccination

General Practitioners in the borough notified that they had carried out 825 vaccinations and 192 re-vaccinations during the year, compared with 2,221 vaccinations and 804 re-vaccinations in 1958.

The high figure in 1958 was due to there having been a number of confirmed cases of smallpox in Bebington that year.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number vaccinated ...	655	43	39	33	55	825
Number Re-vaccinated	1	1	7	23	160	192

Poliomyelitis Vaccination

Vaccination was available throughout the year to all persons over six months and under 26 years of age, in addition to expectant mothers, medical practitioners, certain hospital staffs and ambulance service staffs, as well as families of the latter three groups. "Booster" or third injections were offered to all persons seven months after they had received the second injection.

In the spring of the year an intensive publicity campaign was conducted in the borough, notices giving details of the facilities for vaccination being displayed in the public libraries and clinics and on the motor buses and ferry boats, etc.

The response to evening clinics for adults, which were held from the 1st March to the 30th June, was initially disappointing. The untimely death of a well-known international footballer from poliomyelitis resulted in there being a greatly increased demand for protection against the disease. Evening sessions held at the Health Clinic, Water Street, Wallasey, and the Health Clinic, Oakenholt Road, Moreton, were then almost overwhelmed by the number of applications. On one evening alone 452 persons were vaccinated at Water Street Clinic.

The demand for vaccination so exceeded expectations that the Health Committee asked the Council that the current year's estimates be supplemented by an extra £2,000 0s. 0d. to meet the cost.

There were adequate supplies of vaccine available during the year, mostly of British manufacture. Imported Salk vaccine was also used during the first few months of the year.

POLIOMYELITIS VACCINATION — 1959

	PRIMARY VACCINATION			Total	BOOSTER DOSES		
	Type of Vaccine				Type of Vaccine		Total
	British	Salk	British/ Salk		British	Salk	
Children—Male (15 yrs. and under)	2,524	1,382	781	4,687	2,240	2,370	4,610
Children—Female (15 yrs. and under)	2,465	1,324	777	4,566	2,343	2,434	4,777
Expectant Mothers	187	130	78	395	43	26	69
Doctors and Families	7	—	—	7	12	—	12
Ambulance Staff	3	—	1	4	1	14	15
16-25 Yrs and others including Hospital Staff	1,565	1,112	1,302	3,979	830	401	1,231
Total	6,751	3,948	2,939	13,638	5,469	5,245	10,714
Total number of persons receiving primary vaccination — 13,638					Total number of persons receiving Booster vaccinations-10,714		

It is gratifying to note that a total of 13,638 persons received a primary course of vaccination and 10,714 persons received "booster" injections during the year. At the beginning of the year 3,610 persons who had registered were awaiting vaccination and in addition 2,836 had received one injection only. At the end of the year these numbers had been reduced to 160 and 188 respectively. Full details are given in the table on page 41.

Of the 13,638 persons who received a primary vaccination 8,264 were vaccinated by their family doctor and 5,374 attended the local health authority clinic.

Of the 10,714 persons receiving a "booster" dose 5,908 were vaccinated by their family doctor and 4,806 attended the local health authority clinic.

Number of children vaccinated during the year—by age group (as at 31.12.59).

<i>Age</i>	<i>Primary Vaccination</i>	<i>Booster Dose</i>
Under 1 yr.	50	—
1 yr. +	720	165
2 yrs. +	633	776
3 yrs. +	493	638
4 yrs. +	461	541
5 yrs. +	471	631
6 yrs. +	451	620
7 yrs. +	444	650
8 yrs. +	501	667
9 yrs. +	557	685
10 yrs. +	543	685
11 yrs. +	635	661
12 yrs. +	739	734
13 yrs. +	722	662
14 yrs. +	622	583
15 yrs. +	1,211	689
Totals	9,253	9,387

B.C.G. Vaccination (Tuberculosis)

Full details of this service are given on page 47 in the section of the report "Prevention of Illness — Care and After-Care."

Diphtheria Immunisation

During the year 1,009 children received the full course of immunisation against diphtheria, 659 being immunised by general practitioners and 350 at the Council's Clinics.

In addition 451 children who had received the full course five years ago were given a reinforcing dose, 215 by general practitioners and 236 at the clinics.

The table on page 43 shows the number of children immunised each year from 1944.

TABLE SHOWING NUMBER OF CHILDREN IMMUNISED—BY AGE GROUPS

Age	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Under 1 year ..	30	27	37	140	67	86	47	73	86	60	135	134	191	102	188	79
1 year +	478	835	730	635	865	740	772	762	718	621	770	700	705	667	851	651
2 years +	78	168	160	78	279	181	229	236	232	172	277	160	177	149	197	151
3 years +	58	60	91	47	75	77	85	71	71	64	89	97	70	44	77	49
4 years +	51	39	50	25	33	38	55	46	44	42	62	61	48	26	40	18
5 years +	82	63	59	32	54	31	42	56	52	48	48	52	54	32	22	19
6 years +	68	45	45	26	43	23	33	34	65	49	45	46	44	26	22	20
7 years +	37	22	23	9	7	10	12	11	22	20	20	17	16	15	21	5
8 years +	51	22	21	8	4	3	5	5	8	6	10	14	10	4	4	4
9 years +	74	43	15	7	7	6	9	7	5	4	6	11	10	6	4	4
10 years +	44	24	16	7	11	4	3	6	8	8	10	4	9	3	4	2
11 years +	60	19	13	5	5	3	3	7	—	20	7	17	7	7	6	4
12 years +	39	12	13	3	4	1	3	10	3	6	2	8	8	1	8	1
13 years +	64	12	11	5	3	—	—	2	—	—	—	1	4	1	2	—
14 years +	20	1	5	1	1	1	1	1	2	—	—	—	3	—	1	—
15 years +	17	7	1	—	—	—	1	—	1	—	2	2	1	—	—	—
Over 16 years ..	6	12	1	—	1	2	1	1	4	—	—	1	—	1	2	2
Total ..	1,257	1,411	1,291	1,028	1,459	1,208	1,301	1,328	1,321	1,120	1,483	1,325	1,357	1,084	1,449	1,009

Total under
5 yrs. of age
at 31/12/59
4,209

Total over
5 yrs. and
under 10 yrs.
at 31/12/59
5,935

Total over
10 yrs. and
under 15 yrs.
at 31/12/59
6,425

Whooping Cough Immunisation

Triple antigen is used for immunisation and a single course of injections thus gives immunity to diphtheria, whooping cough and tetanus.

During the year, 982 persons received the course of immunisation against whooping cough.

Comparable figures for the last two years are as follows :—

1957	...	...	...	...	920
1958	...	...	...	...	1,376

SECTION 27 — AMBULANCE SERVICE

The day-to-day administration of the Ambulance Service is carried out by the Chief Fire Officer subject to the overall control of the Medical Officer of Health.

The ambulance vehicles are housed at the Central Fire Station, Manor Road, Wallasey. To serve the needs of the Moreton area, two vehicles are despatched each day to the Super Garage, Moreton.

The radio communication system fitted in 1956 has proved to be of great value and has undoubtedly resulted in considerable saving both in time and mileage.

Arrangements continue to be made for long distance cases to be conveyed by train to relieve the pressure on the service.

As in the previous year the vehicular strength was as follows :— Six ambulances each capable of carrying 2/4 patients in an emergency; two omni-coaches for sitting cases each capable of carrying 13 persons and one car for long distance journeys. An additional stretcher case ambulance was placed on order during the year and delivery is expected early in 1960.

24 driver/orderlies are employed on a rota system in addition to three persons engaged on telephone duties. A mechanic was appointed as from 14th September, 1959, on the recommendation of the Health Committee to service and repair the ambulance vehicles and also the fleet of mopeds used by the Home Nursing Service.

Each year since the inception of the National Health Service Act the number of cases continues to increase. The year 1959 is no exception, 4,818 more cases having been conveyed than in the previous year. The number of cases conveyed since 1947 is :—

1947 — 3,854	1953 — 25,540
1948 — 9,115	1954 — 25,225
1949 — 16,680	1955 — 26,394
1950 — 21,385	1956 — 27,814
1951 — 24,891	1957 — 26,740
1952 — 24,416	1958 — 28,255
	1959 — 33,073

AMBULANCE SERVICE—NUMBER OF CASES CONVEYED—1959

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Maternity ..	91	60	70	61	68	76	51	67	78	57	56	63	798
Mortuary ..	20	15	12	8	16	8	8	7	2	9	6	16	127
Sudden Illness ..	17	17	11	—	40	34	39	44	44	36	32	27	341
Works and Street Accidents ..	99	77	101	123	154	166	170	246	123	99	73	76	1,507
Mental ..	53	23	29	22	15	16	23	12	13	7	8	15	236
Infectious Diseases ..	20	19	15	7	4	2	2	3	5	3	14	13	107
Malicious False Alarm and False Alarm ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Cases ..	2,573	2,388	2,329	2,549	2,515	2,573	2,625	2,509	2,244	2,589	2,399	2,637	29,957
Totals ..	2,873	2,599	2,567	2,770	2,812	2,875	2,945	2,888	2,509	2,800	2,588	2,847	33,073
Mileage ..	13,432	12,813	12,338	13,408	13,782	13,921	14,640	13,223	12,756	13,006	11,986	12,654	157,959

The total mileage covered in 1959 was 157,959 compared with 148,482 in 1958. The table on page 45 shows the different types of case carried each month of the year.

A communication has been forwarded to the Secretary of the Hospital Management Committee and doctors in the borough, asking for their co-operation in ensuring that the utmost economy is exercised in the use of the service.

SECTION 28 — PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis

	1959	1958	1957	1956	1955	1954	1953	1952
No. of Primary Notifications	84	77	66	83	91	95	104	121
Pulmonary	70 = 35 men			29 women		6 children		
Non-pulmonary	14 = 3 men			7 women		4 children		

Classification of non-pulmonary cases :

Hip	3	Abcess in neck	1
Spine	2	Renal Tract	1
Right Knee	1	Endometritis	1
Pelvic Viscera	1	Gland in neck	1
Cervical Adenitis	1	Kidney	1
Fallopian Tubes	1		

Table of Primary Notifications &c. :

	Notifications		Deaths		Death Rate
	Pul.	Non Pul.	Pul.	Non Pul.	Per 1000
1959	70	14	8	1	0.09

No. of Notified Cases of Tuberculosis on Clinic Register :

1st January, 1959	1,001
31st December, 1959	1,035
Transfers from other Areas	18
Lost sight of cases returned	5
New Cases Diagnosed during the year	84
Total visits by Health Visitors	1,690

Prevention :

No. of new contacts examined during 1959	395
No. of new cases diagnosed	84
Contact Rate	4.7
No. of new cases detected by contact examination	2
No. of cases detected by School Contact examination	—
Home Nursing Service treated	64
B.C.G. Vaccinations	194

The number of primary notifications this year has risen by seven. It must be remembered, however, that a large Mass Radiography Survey was held in Liverpool in March, 1959. This produced 12 new notifications in Wallasey, 3 of whom were positive. If we conclude that these three would have been detected in 1959, then that would

give a total of 75 notifications without the 9 negative cases found in the Survey. It would appear that there is little change in the level of tuberculosis in Wallasey, as all the nine negative cases were quiescent. There are more elderly male chronic cases turning up.

Prevention

Elderly male cases tend to have many contacts in the shape of grand-children, so it is obvious that the prevention side of Public Health must remain alert. This year's contact rate of 4.7 as opposed to 2.69 last year shows that the Health Visitors have been efficient.

It will be noted that the figure for Mantoux Positive school contacts attending the Clinic dropped from a total of 266 to 168. This is because such contacts were dealt with by the Mass Radiography Unit between November 1958 and May 1959. After that the question of radiation hazard from mass radiography films made it desirable that children under 15 should be x-rayed on a static set where the radiation danger was less, thus they are again being dealt with at the Clinic.

Care

The Health Visitors made 1,690 visits this year. It must be stressed that these ladies also serve on various committees involving Tuberculosis Welfare and do very good work which cannot be recorded statistically.

The Home Nursing Service treated 64 patients as opposed to 58 last year, in its usual cheerful and efficient manner. Most patients speak kindly of the Home Nurses and regard them as friends.

Families receiving clothes &c.	50
Housing defects reported by Health Visitors	11
No. of patients receiving milk	14
No. of cases re-housed	—
Referred to Education Dept.	3
Home Helps	4
Children Mantoux positive at School	100
No. of contacts attending through above	107
No. of Mantoux positive children at School who attend Clinic	51
Free School Meals	2

Vaccination of Schoolchildren with B.C.G.

The table below shows details of this work for the years 1955 to 1959 inclusive. As will be seen, the number of children vaccinated has increased progressively year by year. Moreover, the incidence of Mantoux positive children — which is an indication of the prevalence of tuberculosis infection in the community — has continued to fall from 18.8% of the children tested in 1955 to 8.5% of the children tested in 1959.

B.C.G. Vaccination — School Children :

No. of children—	1955	1956	1957	1958	1959
offered B.C.G. vaccination	1,085	1,315	1,398	1,545	1,783
accepting B.C.G.					
vaccination	851	927	1,030	1,121	1,215
Mantoux tested	821	917	1,013	1,084	1,168
found Mantoux positive	154	140	148	106	100
Percentage of children—					
Mantoux positive	18·8%	15·3%	14·6%	9·8%	8·5%
No. of children—					
found Mantoux negative	666	775	869	958	1,064
vaccinated with B.C.G.					
vaccine	660	769	861	946	1,061
Re-Tests after 1 year					
No. of children—					
Mantoux re-tested ...	269	583	668	1,112	697
found negative	7	20	26	13	6
Percentage of children—					
Mantoux negative	2·6%	3·4%	3·9%	1·0%	0·8%
No. of children—					
re-vacc. with B.C.G. vacc.	—	—	15	5	4

Provision of Nursing Equipment

There has continued to be a heavy demand for articles of equipment on loan. A small charge is made varying from 6d. per week for the smaller articles such as back rests and bed-pans, to 3/6d. per week for Dunlopillo mattresses. In cases of hardship no charge is made.

A stock of equipment is stored at a central depot, with the exception of a small number of articles which are kept at the Nursing Centre, 86a, Penkett Road, Wallasey, for emergency use.

In 1959 a total of 813 articles were issued on loan as follows :—

Air-rings	88	Mackintosh sheets ...	146
Back rests	124	Self-lifting pole	2
Bed pans	179	Tripod Sticks	19
Bed Tables	3	Male Urinals	35
Bed with Lifting Pole	2	Female Urinals	8
Commodes	112	Wooden Blocks	8
Dunlopillo Mattress ...	4	Wooden Bed Blocks...	2
Invalid Chairs	64	Oxford Hoist	1
Knee cages	16		

Domiciliary Laundry Service for the Incontinent Chronic Sick

This service commenced at the beginning of September, 1959. Nine sheets are initially left at each home and the soiled sheets are replaced with clean on alternate days.

The following are details of the service since its inception :—

September to 31st December, 1959 :—

No. of sheets issued	942
No. of cases to whom sheets issued ...	21
No. of cases carried forward to 1960 ...	7

The scheme is working satisfactorily and is much appreciated by the patients and relatives.

Health Education

As dental caries is the worst nutritional disease of modern times, an Exhibition on Dental Health was held for one week in Water Street Clinic and for one week at Moreton Health Clinic, and was also shown at each Infant Welfare Centre. The large number of mothers attending greatly enjoyed the Exhibition. Pamphlets, leaflets, etc., were distributed.

The Principal Dental Officer gave a short talk to the mothers at each Centre entitled "Promotion of Good Dental Health in the under 5's." These talks on every occasion were followed by a lively discussion between the health visitor, the mothers and the Principal Dental Officer.

The staff continue to give talks on health matters to women's clubs and other organisations on such matters as Parentcraft, Clean Air, Mental Health, Food Hygiene, etc. Members of the health visiting staff have taken part in lectures in connection with the W.V.S. "One-in-Five" Scheme.

As stated earlier in the Report, the Superintendent Health Visitor attended a Course at Manor Hall, Bristol, which included various aspects of health education.

The poster display boards in Liscard Road and at Moreton Clinic have been used throughout the year, particular emphasis having been given to the importance of dental health and poliomyelitis vaccination.

A handbook giving full details of the "Health and Welfare Services" of the borough is being compiled and will be published early in 1960. The booklet will be issued free of charge and sufficient copies will be available to enable a wide distribution to be made.

Copies of the publication "Better Health," the official journal of the Central Council for Health Education are purchased each month and distributed free from the Public Health Department, the various clinics, the Education Department and also the office of the Wallasey Executive Council.

An annual subscription is paid by the authority to the Central Council for Health Education.

Dr. A. J. Dalzell Ward, M.R.C.S., L.R.C.P., D.P.H., Medical Director and Mr. D. Lynton, Education Officer of the Central Council for Health Education, conducted a successful two-day "In Service" Staff Training Course for members of the Health Department staff, including the medical officers, health visitors, social workers, etc., on 24th and 25th March, 1959. The Course dealt with "Human Relations."

Posters dealing with the various aspects of health education have been displayed on the notice boards in the Town Hall and in other departments of the Corporation, in the libraries and on the ferry boats. The Hospital Management Committee have also co-operated in the display of publicity material in the various hospital out-patient departments.

Venereal Disease

The following table shows the number of Wallasey patients receiving treatment for the first time at various centres during 1959 and 1958.

1959	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other conditions</i>	<i>Total</i>
Mill Lane Hospital, Wallasey	—	6	21	27
St. James Hospital, Birkenhead	2	17	41	60
Royal Infirmary, Liverpool	—	1	19	20
Mill Road Clinic, Liverpool	—	1	—	1
Seamen's Dispensary & V.D. Clinic, Liverpool	1	10	66	77
	3	35	147	185

1958	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other conditions</i>	<i>Total</i>
Mill Lane Hospital, Wallasey	1	3	17	21
St. James Hospital, Birkenhead	5	25	57	87
Royal Infirmary, Liverpool	2	1	17	20
Seamen's Dispensary & V.D. Clinic, Liverpool	3	14	54	71
	11	43	145	199

In several towns the incidence of venereal disease has shown a marked increase in 1959. It will be noted, however, that the number of Wallasey cases treated in 1959 shows a decrease compared with the previous year.

Plastic notices were fixed in all the conveniences in the borough and on the ferry boats, giving details of the centres where, in the strictest confidence, treatment can be obtained. The advisability of obtaining early treatment was stressed.

SECTION 29 — DOMESTIC HELP SERVICE

Mrs. G. Malcolm Falla, Organiser, reports as follows :—

“The Home Help Service has now become widely known in the Borough and consequently it is difficult to keep pace with the constant demand for help. No essentially deserving case is ever turned down although this means that some existing cases have to be drastically cut down. The number of old people and chronic sick, requiring indefinite daily service, continues to increase and this absorbs a large section of the staff. Without home help these cases would be in hostels or hospital. There has also been an increase in the number

of cases in which the mother has been in hospital for a prolonged period and the helper has been in charge of the children and the home generally."

The annual outing in May to Llandudno was enjoyed by 43 members of the staff and, as usual, it was a very happy and sunny day.

Statistics for 1959

	<i>Mat.</i>	<i>T.B.</i>	<i>O.A.P.</i>	<i>Others</i>	<i>Total</i>
Applications received .	52	1	225	86	364
No. of cases helped ...	54	1	282	89	426
No. of hours worked ...	2,925 $\frac{1}{4}$	46	66,031 $\frac{1}{4}$	9,062	78,064 $\frac{1}{2}$
Cancelled owing to cost ...	...	...	...	...	23
No. of O.A.P. and Widows ...	...	...	...	...	) 207
No. of chronic Sick cases ...	...	...	...	...
No. of helpers 31.12.59 ...	...	...	...	...	62

SECTIONS 28 and 51 — MENTAL HEALTH SERVICES

Under Part III of the National Health Service Act, 1946, the Local Authority is invested with the community care relating to Mental Health, and the Mental Welfare Officers with the statutory duties for securing the detention and reception of mentally disordered persons requiring hospital treatment and care.

The responsibilities placed upon the Local Health Authority in relation to Mental Health are :—

- The ascertainment of mental ill-health and mental deficiency.
- The administrative arrangements for obtaining Detention and Reception Orders, and the escorting of mentally disordered patients to Hospitals.
- The supervision and community care of the mentally defective.
- The administrative arrangements for the voluntary and informal admission to Hospital for treatment and care of the mentally disordered.
- Prevention, care and after-care work in the community in the field of mental health.

Administration

The Local Health Authority carries out all duties in connection with the Mental Health Service, none being delegated to Voluntary Associations.

The Medical Officer of Health is the Administrative Officer, and the other three medical officers of the Local Health Authority are approved under Sections 3 and 5 of the Mental Deficiency Act, 1913, for the purpose of giving medical certificates.

The Mental Health Staff consists of three Mental Welfare Officers and one Mental Health Worker. The Mental Welfare Officers carry out the statutory duties of the Local Health Authority and also act as social workers in the fields of prevention and after care. Each Mental Welfare Officer has his own district, and with his knowledge of the Statutory and Voluntary social services in the

Borough he is able to seek the services applicable to the need of each case. By befriending the patients and developing a personal relationship with them it is often possible to persuade them to seek treatment on a voluntary basis, in an early stage of the illness, thus avoiding the necessity for compulsory treatment later. Where confidence and trust is well established, patients will seek help and advice from their Mental Welfare Officer on their problems quite readily and look to him for support and encouragement in facing their troubles.

One third of the time of the Mental Welfare Officers is allocated to the Welfare Committee, and in their dual role they are often able to assist the same patient in their other capacity.

Miss Phillips commenced duty as Mental Health Worker on the 1st February, 1959, and supervises the mental defectives in their own homes as well as assisting with the after-care service for the mentally ill.

Two of the staff attended a week-end educational course at Burton Manor in July, and also attended a course of evening lectures on Mental Health at Liverpool University during the Autumn.

General Observations

During the year 1959, the Mental Health Act was passed into law, and much preparatory work has been done in anticipation of the new Act coming into force, including the drafting of proposals to be submitted to the Minister under Section 20 of the National Health Service Act, 1946, for the provision of Mental Health Services under Section 28 of the Act in accordance with the Mental Health Act, 1959.

In the field of prevention several talks were given to local organisations on the subject of mental health, helping to educate the public to a wider understanding of the problems and trying to eliminate the old attitudes of prejudice and fear in what was once regarded as an unattractive and depressing subject.

Radio and television programmes have stimulated the interest of civic minded groups and the demand for speakers in the future still continues.

The co-ordination and integration of the existing service has continued to develop and the happy relationship of the staff with the local general practitioners, psychiatrists, hospitals, police, and other social agencies has eased the task of dealing with work which is perhaps the most difficult of all social work.

The Medical Officer of Health was invited during the year to attend periodic case conferences at the Deva Hospital, Chester, and the liaison with the hospitals has been further strengthened by an interchange of information between the staff of the hospital and the staff of the local health authority.

There has again been an increase in the number of people prepared to enter mental hospitals as Voluntary Patients. This is a tendency which is encouraged as much as possible as there is always a degree of violation of human dignity when a patient has to be compulsorily removed to hospital. Also, from a practical point of view, it is obvious that a patient who has voluntarily entered hospital

is much more likely to be co-operative and thus benefit from treatment than someone who enters hospital fiercely resenting his situation.

A very recent development has been the admission of patients on an entirely informal basis without any of the formal documents that even Voluntary Patients have had to have in the past.

It will be seen that there has been a considerable increase in the number of admissions to hospital during the year, the figure for 1958 being 297 and that for 1959, 436. Of the latter number 16 were patients admitted to the Senile Dementia Ward (for men) at Westminster House, Liverpool. In previous years these admissions have not been included in the statistics. The increase in the number of Voluntary Patients is partially accounted for by the increasing practice at Deva Hospital of reviewing certified cases and transferring them to voluntary status wherever possible. Another factor has been the policy of accepting senile dementia cases, particularly women, at Birkenhead Mental Hospital and at Deva Hospital. Until this year there has been no satisfactory way of ensuring that these unfortunate old people got the care and treatment that they needed.

The Neurosis Unit at St. Catherine's Hospital Annexe was again busy throughout this year.

Prevention, Care and After-care

A very good relationship has been developed with the individuals and bodies involved in mental health work. The Mental Welfare Officers co-operate closely with the Consultant Psychiatrist, General Practitioners, and the medical and social work staff at Deva Hospital and Birkenhead Mental Hospital. This relationship ensures that patients can be helped by the right agency with a minimum of delay.

Particulars of patients discharged from mental hospitals are sent by the hospital authorities to the Mental Health Office and, in appropriate cases, patients are visited at home soon after discharge and helped to resume their normal life in the community. After-care work is also undertaken with certain ex-service personnel who have been discharged from the Armed Forces on psychiatric grounds.

Lunacy and Mental Treatment Acts

The number of Wallasey patients in Mental Hospitals on 31st December, 1959, was as follows :—

Certified patients (Section 16, Lunacy Act, 1890)	...	...	...	310
Voluntary patients (Section I, Mental Treatment Act, 1930)	.			89
Temporary patients (Section V, Mental Treatment Act, 1930)				—
Informal patients	...	...	...	6
				<hr/>
			Total	405
				<hr/>

There were 436 admissions to Mental Hospitals during the year as follows :—

Mental Treatment Act, 1930

Under Section I (Voluntary Patients)	<i>Male</i>	<i>Female</i>	<i>Total</i>
Deva Hospital	70	98	168
Rainhill Mental Hospital	1	—	1
Denbigh Mental Hospital	—	1	1
Birkenhead Mental Hospital	6	9	15
Total ...	77	108	185

Under Section I (Sub-Sections 2 and 3)
(Voluntary Patients under 16 years)

Deva Hospital	1	—	1
Under Section V (Temporary Patients)			
Deva Hospital	—	—	—

Criminal Justice Act, 1948

Under Section 4			
Deva Hospital	—	1	1

Lunacy Act, 1890**Under Section 20** (3 day Order) by Mental Welfare Officer to :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Birkenhead Mental Hospital ...	28	50	78
Deva Hospital	17	37	54
Sefton General Hospital	2	3	5
Total ...	47	90	137

Under Section 21 (14 day Order) by Justice of the Peace to :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Birkenhead Mental Hospital ...	—	1	1
Deva Hospital	3	9	12
Total ...	3	10	13

Under Section 16 (Certified Patients) to :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Deva Hospital	28	28	56
Birkenhead Mental Hospital ...	2	15	17
Haydock Lodge Licensed House ...	—	4	4
Total ...	30	47	77

Informal Patients

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Deva Hospital	4	1	5
Birkenhead Mental Hospital ...	1	—	1
Westminster House (Senile Dementia Ward)	16	—	16
Total ...	21	1	22

Domiciliary Visits by Mental Welfare Officers :

To cases under Lunacy and Mental Treatment Acts	...	...	1,338
Prevention, Care and After-Care visits	...	...	650
			<hr/>
Total	...		1,988
			<hr/>

Mental Deficiency Acts, 1913-38

Total number of Mentally Defective Persons on the Local Health Authority's Register (excluding children being dealt with by the Education Authority) on 31st December, 1959 :—

Is made up as follows :—

Defectives in Institutions	...	...	...	...	...	123
Defectives in "Places of Safety"	...	...	...	...	...	7
Defectives under supervision in the Community	...	...				141
						<hr/>
Total	...					271
						<hr/>

Defectives in the Community

Mental Defectives living in the Community are visited regularly in their homes by a Mental Welfare Officer and a friendly relationship is quickly established. This is usually greatly appreciated by the parents who derive a feeling of support in thus sharing their burden and expressing their innermost fears. The periodic friendly discussion of problems, training and management which invariably follows, undoubtedly helps the parents to a fuller realisation and eventual acceptance of their own child's limitations and potentialities and thereby clears the way for constructive and purposeful training.

During the year a total of 670 visits were made by Officers of the Mental Health Department.

Thirty-two mental defectives now attend the Junior Training Centre at Hale Road and many older defectives look forward to receiving training at the Adult Centre when it becomes available. Meanwhile, three of the older boys are attending Classes for the Physically Handicapped at Penkett Road and/or Moreton. Three Spastic children also are receiving special treatment at Spastic Centres in Wallasey and Birkenhead, whilst two attend the Birkenhead training School for Spastics.

Advice and help is given in obtaining any such special treatment, appliances, equipment, bedding, clothing, financial or other help which may be considered desirable. Older defectives are advised on such matters as obtaining National Assistance Allowances and are helped wherever possible to secure suitable employment, or occupation.

In cases of domestic emergency or severe family stress it is sometimes possible to arrange for a defective's admission to hospital or home for a limited period thus relieving the parents for a time and sometimes enabling them to take a much-needed holiday before once more shouldering their burden. In the past 12 months twelve cases have been admitted to short-term care in this way for an average period of three weeks each. Periods of short-term relief of this kind together with daily admission to Training Centres make it possible for

defectives to remain in the community who would otherwise require permanent care in an Institution but vacancies are extremely difficult to obtain in Regional Hospital Board Homes and the few private homes available are obliged to charge far more than most families can afford to pay.

As can be seen the co-operation and goodwill established between workers in allied fields of welfare and social service both statutory and voluntary is resulting in a widening of facilities available. This is also evidenced by the willing co-operation of Consultants and Specialists — notably Dr. Fraser Mackenzie, the Regional Adviser in Mental Deficiency who has personally visited the Borough to make special examinations and has expressed willingness to give help, advice or guidance whenever his extensive experience is likely to prove of particular value.

The local Society for Mentally Handicapped Children has also contributed to the entertainment and general welfare of older defectives by organising and supervising a Social Evening every Wednesday night at Hale Road. Their major project, however, continues to be the raising of funds for the establishment of a Sheltered Workshop.

Defectives in Institutions

Co-ordination is maintained between the Hospital Management Committees of the various Institutions and the Local Health Authority. The Mental Welfare Officers visit the homes and supply the following reports, as required :—

- (i) Reports for the information of the Visitors when carrying out their Statutory duties under Section II of the Mental Deficiency Act.
- (ii) Home circumstances reports in respect of applications for holiday leave or licence.
- (iii) Progress and Supervision reports with regard to patients on licence from Institutions.

Admissions to Institutions during the year were on an “informal basis” whilst 17 patients previously detained under Order in Institutions have, during 1959, been discharged from Order and allowed to remain on an “informal basis”—two of these cases have since returned to their families.

Particulars of Mental Defectives ascertained during the year

(1) Ascertainment

Cases reported by Local Education Authorities
(Section 57, Education Act, 1944) :—

	<i>M.</i>	<i>F.</i>	<i>Total</i>
(i) Under Section 57 (3)	4	1	5
(ii) Under Section 57 (5)	2	—	2
Reported from other sources	2	1	3
<hr/>			
Total cases ascertained to be “subject to be dealt with” during the year ...	8	2	10
<hr/>			

	<i>M.</i>	<i>F.</i>	<i>Total</i>
(2) Disposal of Cases reported during the year			
Placed under Statutory Supervision ...	6	2	8
Admitted to Institutions	2	—	2
	—	—	—
Total ...	8	2	10
	—	—	—

Mental Defectives awaiting vacancies in Institutions

	<i>M.</i>	<i>F.</i>	<i>Total</i>
(1) Cot and chair cases	1	1	2
(2) Ambulant low grade	8	2	10
(3) Medium grade	1	3	4
(4) High grade cases	1	—	1
	—	—	—
Total ...	11	6	17
	—	—	—

Junior Training Centre

During the year extensive structural alterations to the Centre were undertaken and the buildings have been entirely redecorated throughout.

There is now accommodation for approximately 90 children and under an arrangement with Birkenhead, severely sub-normal children from that area attend the Centre.

In order that as much individual attention as possible can be given to each child, the classes are sub-divided into groups of approximately twelve children. At the end of December, 1959, 31 Wallasey children and 39 children from Birkenhead were on the register.

The ages of the children vary from 5 years to 16 years. In addition, there are several over 16 years, who have been grouped into a special class pending the provision of an Adult Training Centre.

The Centre is open five days per week — Monday to Friday — from 9 a.m. to 4 p.m. and is closed for one month in the summer and approximately four weeks during the remainder of the year.

Special buses convey the children to and from the Centre.

The children are instructed in various handicrafts and hand work, including basket and rug making, mop making, embroidery, simple sewing, painting, papier mache work, cardboard modelling and woodwork. Musical activities include maypole and country dancing. Physical training is also carried out.

A Sports Day was held at the Scouts Field, Overchurch and the Annual Outing to Southport, which was held on the 11th July, was very much enjoyed by the children.

The Centre is open on various days for parents and friends to visit, displays of physical training and musical movement having been given on one occasion. The children took part in a pantomime at Christmas time to which parents and friends were invited.



PART IV.

General Health Services, etc.

FOOD AND DRUGS ACT

Of 111 samples of milk submitted to the Public Analyst only one was deficient in fat. The deficiency was caused by inadequate stirring during bottling, and further samples from the same supply were genuine. Five samples had a small natural deficiency in solids-not-fat, but the fat content in each was well above standard.

The average content of Channel Island milk was 4·36% of fat and 9·18% of solids-not-fat. For other milk 3·44% of fat and 8·64% of solids-not-fat.

Of 288 samples of other foods only three were found to be unsatisfactory.

1. Novelties described as milk chocolate which did not contain milk fat or cocoa butter. These appear to have been withdrawn from sale.
2. Evaporated milk with a small deficiency of fat. Further samples indicated that this was an isolated case.
3. Chopped ham with a meat content that the sellers agreed should be increased.

FERTILISERS AND FEEDING STUFFS ACT

11 samples of feeding stuffs and 9 samples of fertiliser were submitted to the Analyst. All complied with the requirements of the Act.

PHARMACY AND POISONS ACT

During the year the following applications were made :—

For registration	9
For re-registration	139

CONTROL AND SUPERVISION OF MILK SUPPLIES

In October, 1950, the first steps were announced by the Minister of Agriculture and Fisheries, in the area Tuberculosis Eradication plan which aimed at the total and complete elimination of bovine tuberculosis in England, Scotland and Wales.

The plan to be introduced on an area basis, was expected to occupy a period of from between 15-25 years before completion. From the considerable progress which has been made, it is now certain that this period will be substantially reduced, as the Minister is, next year, to confirm the last remaining eradication areas, thereby having by that time geographically embraced the whole of the British Isles for the purpose of completing this compulsory disease eradication scheme.

This does not mean that by 1960, bovine tuberculosis will have been stamped out, but it does furnish proof of the tremendous progress which has been made to this end.

In order to ensure the continued safety of supplies and as a means of making a final assessment prior to delivery to the consumer, all milk retailed in this district and originating from dairies,

processing establishments and farms, is sampled by the department. The samples are submitted for statutory testing to the Public Health Laboratory and the following is a summary of the work carried out by the department during the year :—

Pasteurised Milk

No. of samples obtained 124,	
of which	113 satisfied both the Methylene Blue and Phosphatase Tests.
	10 test void*
	1 contents lost
	<hr/>
	124
	<hr/>

Tuberculin Tested Milk — Pasteurised

No. of samples obtained 37,	
of which	35 satisfied both the Methylene Blue and Phosphatase Tests.
	2 failed the Methylene Blue Test.
	<hr/>
	37
	<hr/>

Tuberculin Tested Milk — Pasteurised (cartoned supplies)

No. of samples obtained from milk vending machines 8,	
of which	3 satisfied both the Methylene Blue and Phosphatase Tests.
	5 test void*
	<hr/>
	8
	<hr/>

* The keeping quality test for Pasteurised milk is declared void if the overnight atmospheric temperature in the vicinity of the sample exceeds 65°F.

Sterilised Milk

Three samples of Sterilised milk were submitted to the Turbidity Test and the reports received indicated that the samples were satisfactory.

Sterilised milk is subjected to the process of homogenisation which accounts for its creamy consistency. It is popular in many homes for use with the breakfast cereal and its use is favoured by many in puddings and other milk dishes.

Sterilised milk, providing the bottles remain unopened, may be conveniently kept on hand during the hottest weather and will remain perfectly sweet and wholesome without resort to storage under cool or refrigerated conditions.

There is a popular and growing demand for milk of this designation.

Tuberculin Tested Milk — Pasteurised

Supplies of Tuberculin Tested Milk Pasteurised in pint bottles are freely obtainable, together with supplies in $\frac{1}{2}$ pint waxed cartons, the latter being purchasable from two milk vending machines which are in operation in the Borough. Cartoned milk supplied in this way is dispensed ice cold and is eagerly sought, especially by children, during the summer period. A somewhat increased or inflated price is charged for milk dispensed in this way, but providing pure and wholesome supplies are continuously maintained, its popularity is likely to increase, regardless of price differentials, particularly when considering the convenience and special advantages which this type of milk service provides.

It is of interest to point out that the gross sales from these machines when measured in terms of $\frac{1}{2}$ pint cartons, represent not only an appreciable volume of milk, but also a considerable number of individual purchasers, from whom no complaint or criticism has been received.

Despite the foregoing, sampling from this source has not been resorted to for a sufficiently long period or as intensively as might be desirable for an accurate assessment to be made concerning the wholesomeness and keeping quality of the milk supplied.

There is much to be said in favour of the universal use of non-returnable waxed paper containers in the retail sale and distribution of milk. There are, however, both practical and economic difficulties which prevent the likelihood of any large scale development in this direction at the present time.

Raw Milk

Farm bottled Channel Island milk is the only unprocessed milk purveyed within the Borough. It is derived from dairy herds consisting of the Guernsey and Jersey breeds of cattle which, in addition to the natural immunity from disease which these breeds enjoy, are certified and maintained free from tuberculosis.

Four descriptions of this designated milk are authorised under the Regulations. They are "Channel Island," "Jersey," "Guernsey" and "South Devon." "Channel Island" milk is rich in cream and the use of the descriptions referred to are restricted to milk which has not less than 4% by weight of milk fat. Supplies are readily obtainable through most distributors.

The samples of milk taken by the department were obtained from the following sources :—

[illegible]

Total number of samples submitted for Laboratory testing	172
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12 complaints relating to milk supplies were received involving special investigation. In addition, a number of miscellaneous enquiries were dealt with.

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949

The Milk (Special Designation) (Raw Milk) Regulations, 1949

The Milk and Dairies Regulations, 1949

There are three registered dairies at which the pasteurisation of milk under licence is carried out. Frequent sampling is resorted to in order to assess the efficiency of the processing methods and to ensure that the milk conforms to the statutory standards laid down both in respect of adequate heat treatment or pasteurisation and keeping quality. Steam and hot water combined with the use of modern detergents and sterilents provide the means of cleansing and sterilising churns, milk apparatus and milk equipment. Milk bottles are similarly subjected to the same cleansing and sterilising agents and are dealt with by mechanical means in modern bottle washing plants.

There are 128 registered milk distributors licensed to retail bottled supplies of designated milk. The number of licences granted during this year was as follows :—

To use special designation " Pasteurised "	... ..	124
To use special designation " Sterilised "	... ..	100
To use special designation " Tuberculin Tested "	... ..	73
Pasteuriser's licences	... ..	3

253 visits were made to dairies and other premises engaged in the handling and storage of milk.

Milk vessels

Milk bottles are a constant cause for concern both to the department and to the distributors. They are regarded by some people as being of no further use or value once the milk has been extracted, whilst their use for containing unauthorised liquids is a practice to be deplored and discouraged.

The indiscriminate breaking of milk bottles also presents additional problems and dangers, not only in the home and in the streets, but also on our foreshore and sands.

Those people who rinse and return their milk bottles promptly after use, and this is all that is asked, are performing a valuable service and it would be gratifying if those who tend towards treating these matters with indifference were to emulate this simple daily practice.

Milk in Schools Scheme

During the year 2,623,052 one-third pint bottles of milk (109,293 gallons) were supplied under the Milk in Schools Scheme, a decrease of 68,611 one-third pint bottles of milk (2,859 gallons) compared with the quantity supplied during the previous year.

The schools continue to be catered for by six suppliers, the contract being to provide supplies of pasteurised milk in one-third pint bottles, together with drinking straws. Frequent sampling is carried out at the schools by this department in order to ensure by laboratory examination the safety of the supplies.

The hygienic standards which are maintained in this specialised branch of milk distribution are in every way consistent with those laid down in the relevant Milk and Dairies Regulations. A number of incidents, however, were reported which indicated some fault or failure on the part of the companies making the supplies.

In a number of instances, communications and samples were forwarded to outside licensing authorities, who continued the investigations and co-operated fully with a view to preventing any recurrence.

Fresh Orange Juice

The purveying of supplies of fresh orange juice in bottles of $\frac{1}{3}$ pint capacity continues to form an important part of the milk distributors' trading activities. As a beneficial beverage, the popularity of this refreshing fruit drink is steadily increasing.

Public Health Laboratory staff

I would like to express my appreciation for the valuable help and assistance given by Dr. Abbott and his staff at the Public Health Laboratories, Birkenhead, in connection with samples of milk and specimens of food submitted for examination by my department.

MEAT AND FOOD INSPECTION

Visits made to food shops, including butchers, fishmongers and other shops engaged in the sale and handling of foodstuffs, resulted in the following quantities of food being disposed of as unfit for human consumption :—

Meat		Fish	
	lbs.		stone
Beef	65	Ray wings	1
Liver	41		<hr/> 1
Total ...	<hr/> 106		<hr/>
Bacon	210 lbs.		
Canned Goods			
	cans		cans
Fruit	267	Meat	12
Vegetables	193	Fruit juices	11
Fish	92	Soup	7
Milk	44	Shellfish	2

Poultry

2 cooked turkey carcasses, partly consumed — 20 lbs.

Miscellaneous

Items of foodstuff	17	Quantity of miscellaneous frozen foods	56 lbs.
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During the year 255 containers comprising corned beef, corned mutton, cooked gammon, cooked shoulder, pork luncheon meat, chopped pork, ox tongue, sliced bacon, pig's tongue, stewed steak and jellied veal, representing a total weight of 1,655 lbs., were dealt with by voluntary surrender as being unfit for the purpose of sale for human consumption.

58 consumer and 15 retailer complaints relating to foodstuffs were received which involved special investigation and enquiry. In one case imported ox liver was found at a butcher's shop to be affected with tuberculosis. This matter was taken up with the Ministry of Agriculture, Fisheries and Food and the Port Health Authority. In another case, a local butcher reported having received 13 separate consumer complaints involving turkey carcasses which had been supplied from his shop in fulfilment of individual Christmas orders.

A further complaint involved a consignment of recently canned fish. On opening a number of sample containers obtained at random from the consignment, an offensive odour was present. This was due to putrefactive changes which had developed in parts of the fish tissue prior to canning. The total consignment was withdrawn from circulation.

Following complaints made to the department, informal test purchases comprising new laid eggs; imported eggs; bread and a meat pie, were made by the department. All of the articles purchased, with the exception of the imported eggs, in connection with which a communication was forwarded to the distributing company, proved in every respect satisfactory.

At a food shop in the Borough, the Food Inspector in liaison with the District Public Health Inspector, dealt with the inspection and the voluntary surrender and subsequent destruction of 3,264 articles of food stuffs, comprising canned meat, soup, milk, fruit, vegetables, sauces, biscuits and other miscellaneous items. This action was necessitated as the result of neglect on the part of the proprietor who, by allowing the food to be exposed to prolonged and unsuitable storage conditions, had rendered it unfit for the purpose of retail sale.

At a shop, a quantity of frozen food involving ices, fish cakes, vegetables, fruit, etc., were rendered unfit for the purpose of sale owing to contamination by smoke following a fire in the refrigerator motor.

In a number of complaints involving food supplies, attention was directed to the legal considerations involved, but no legal proceedings were instituted.

In two complaints involving (a) the presence of extraneous matter in a loaf; and (b) the sale of suet unfit for human consumption, the Council authorised the forwarding of warning letters to the companies concerned.

In a number of instances, the mishandling after purchase of the disputed foodstuffs by the complainants themselves, contributed to the difficulties of investigation and enforcement.

Food found to be unfit for human consumption was disposed of, under supervision, by burial at the Corporation controlled tip.

The Animal Feeding Meat and the Meat Staining Regulations, 1959

The above Regulations required the compulsory staining or sterilisation of all meat unfit for human consumption and were to have come into operation on the 1st April, 1959. In anticipation of this and in view of the provisions contained in the Wallasey Corporation Act which required as and from the "appointed day," 1st April, 1959, the registration of all premises in the Borough used for the sale of animal feeding meats, all pet shops were visited.

On the 26th March, 1959, a new Order was made which revoked the Regulations referred to and in consequence they did not come into operation.

WALLASEY AND ALFRED LAIRAGES

Landing place for Irish and Isle of Man animals and foreign animals landing wharf

This year 40,414 store and fat cattle were accommodated and subsequently despatched by rail and road transport from the Lairage at this landing place. This figure shows a decrease of 11,664 on the number of cattle handled in the previous year.

Of the animals detained by the Veterinary Officers, 59 were slaughtered, this being 91 less than the number slaughtered the previous year.

Post-mortem examination of all carcasses, viscera and offal was carried out by this department and the following is a tabulation of the diseased conditions met with and the condemnations made :—

	Cattle
Number killed	59
Number inspected	59
All diseases except Tuberculosis and Cysticerci	
Whole carcasses condemned	1
Carcasses of which some part or organ was condemned ...	44
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	76.3%
Tuberculosis only	
Whole carcasses condemned	—
Carcasses of which some part or organ was condemned ...	5
Percentage of the number inspected affected with tuberculosis	8.4%
Cysticercosis	
Carcasses of which some part or organ was condemned ...	Nil
Carcasses submitted to treatment by refrigeration	Nil
Generalised and totally condemned	Nil
Total weight of meat and offal condemned	
Meat	635 lbs.
Offal	1,195 lbs.

53 visits were made during the year to the Slaughter House at this landing wharf.

The Food Inspector during the year had discussion with the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, in connection with the Slaughterhouse Hygiene and Slaughterhouse Cruelty Regulations of 1959.

PUBLIC HEALTH (SHELLFISH) REGULATIONS

Mussel and Cockle Beds — Wallasey Foreshore

When the original Order was made prohibiting the taking of shellfish from these layings for the purpose of sale for human consumption, owing to gross pollution, it was mainly the collection of mussels which formed the major part of this local occupation.

In 1951, a subsequent Order made by the Liverpool Port Health Authority modified the original prohibition and authorised the taking of shellfish providing, prior to sale, they had been submitted to an approved process of cleansing or sterilisation.

The mussel layings in this area have, however, ceased to be productive and are no longer worked, but there are indications that cockling continues to be carried out on that part of the foreshore forming the western limits of the Borough boundary.

The taking of shellfish by persons collecting for their own use is an activity which remains outside the scope of the Regulations.

No incidents or complaints relating to shellfish originating from this area were received during the year.

DISEASES OF ANIMALS ACTS AND ORDERS

Notifiable Scheduled Diseases of Animals

The County Borough remained geographically free from restrictions which were, from time to time, imposed in the control of outbreaks of Foot and Mouth Disease.

The County Borough was, however, involved in an extensive area of the country which was scheduled by the Ministry of Agriculture, Fisheries and Food, for the purpose of preventing the spread of Swine Fever. Restrictions were imposed and pigs were allowed to be moved only by licence granted by the local authority. During the period of restrictions 27 licences were granted authorising the removal for immediate slaughter of 336 pork and bacon pigs from premises in the Borough.

During the same period 194 store pigs were brought into the Borough on licence for fattening purposes. One movement licence was granted for breeding purposes. Two breeding sows were brought into the Borough on licence.

Deaths or the illness of pigs at pig keepers' premises were reported on five occasions. In two instances swine fever was suspected and statutory procedure was resorted to. In one case, the premises

remained under restrictions for a prolonged period, but the existence of swine fever was not confirmed. In the other case, swine fever was confirmed and the provisions contained in the Swine Fever Order were enforced.

At a piggery, the deaths of two pigs were reported. Enquiry revealed that the carcasses were from a consignment of 16 store pigs purchased from the Chester Smithfield, the deaths having occurred within the 28 day compulsory detention period following their removal from the sale yard. In consequence, the owner was advised to obtain the services of his private veterinary surgeon. Post-mortem examination revealed no lesions or other evidence to indicate the existence of notifiable disease and no further deaths occurred.

The reported sudden death of a bacon pig was treated as a case of suspected anthrax. The necessary restrictions and precautions were put into operation and the carcase was destroyed by incineration. Blood specimens obtained from the carcase by one of the Ministry's Veterinary Inspectors were forwarded for diagnostic purposes and a negative report was subsequently received.

The difficulties connected with sheep dipping and water supplies were further aggravated this year owing to drought conditions and the anti-flood works which continued in progress on the River Birket and adjoining water courses.

It was not possible for the owner to comply with the local dipping Regulations, but all sheep and lambs were gathered and sprayed with an approved single type all purpose dip, the water used being obtained from a mains supply.

Under the Regulation of Movement of Swine Order of 1950, 561 store pigs were brought into the borough on licence from the Chester, Beeston, Shrewsbury, Doncaster, Mold and Montgomery markets, a decrease of 171 on the previous year.

Observations were, from time to time, made on English and foreign vessels entering the Wallasey dock system in order to ascertain if any dogs, poultry, or hay and straw were being carried with the intention of being landed contrary to the provisions of the relevant Regulations.

Visits were made to piggeries in connection with the provisions contained in the Waste Foods Order, 1957, which demands the adequate cooking or heat treatment of swill in order to ensure the destruction of any disease producing organisms, thus eliminating the risk or spread of Foot and Mouth Disease, Swine Fever and other notifiable animal diseases.

Orders and Regulations made by the Minister of Agriculture, Fisheries and Food were publicised and information was displayed relating to potato crop damage by the colorado beetle. No reports were received of any specimen having been found or recovered in the Borough.

THE CHILDREN ACT, 1948

Children are medically examined as soon as possible after admission to the Children's Homes, and also before discharge, and the medical staff of the Public Health Department give advice whenever necessary.

THEATRICAL EMPLOYERS' REGISTRATION ACT, 1925

No applications for registration were received during the year.

DOMESTIC SERVANTS' REGISTRIES

There were no applications for registration as Domestic Servants' Registries during 1959.

PART V.

*Report of the Chief Public Health Inspector
on the
Environmental Health and Hygiene
of the Area*

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR ON THE ENVIRONMENTAL HEALTH AND HYGIENE OF THE AREA

Introduction

I have pleasure in submitting this Report on the work of the public health inspectorate during the year 1959.

The Council's programme for the demolition of unfit dwelling-houses has now completed its fourth year. During the four years, 495 dwellings have been included in clearance and compulsory purchase orders, or have become subject to demolition orders, closing orders or voluntary undertakings by owners. The end of the year leaves some 104 dwellings to be dealt with during 1960. In April a public enquiry was held by the Ministry of Housing and Local Government to consider objections to The Wallasey (Clearance No. 93) Mount Pleasant Road Compulsory Purchase Order, an area containing 9 unfit dwellings. This Order was later confirmed without modification after a report by the Ministry's Inspector. In September a public enquiry was held by the Ministry of Housing and Local Government to consider an objection to The Wallasey (Clearance No. 95) Union Street Compulsory Purchase Order. The objection concerned the fitness of six terrace dwellings forming part of the clearance area, but this objection was not upheld by the Minister, and the Order was confirmed. At the end of the year, The Wallasey (Clearance No. 96) Greenfield Street Compulsory Purchase Order comprising 62 dwellings, was confirmed without objection.

Behind this rather brief summary lies a remarkable transformation, a transformation which has enabled well over 500 families to find a pleasanter and healthier life in modern housing conditions. It is sometimes said that Wallasey has no slum problem. It is true that there is little of the squalor traditionally associated with "slums": on the contrary, many of these condemned dwellings have been occupied by respectable citizens putting up a most gallant fight against the discomforts and inconveniences of nineteenth century housing standards and progressive decay. Large numbers of worn-out houses are still to be found in Wallasey.

Dwellings classified as unfit for human habitation share certain common features. The general condition of the structures is usually extremely poor. Items of disrepair include loose and missing slates and sagging roofs; perished brickwork and pointing to external walls; extensively cracked and perished plasterwork to internal walls and ceilings; rotted and worn floors, doors and windows; leaking and broken eaves gutters and rainwater pipes. Extensive rising and penetrating dampness is to be found, ruining fresh decorations within a short period of time. Rooms are often dark, particularly sculleries and kitchens, and the use of electric light becomes a necessity even in the sunniest of weather. The ventilation of sculleries and other rooms is often inadequate. Scullery sinks are often worn and insanitary, and drainer boards decayed. Proper ventilated larders are rare and tenants rely upon unventilated cupboards in living rooms, sideboards or kitchen cabinets. The most irksome features, particularly for the young family, have not yet been mentioned. Among these, the absence

of a bathroom is perhaps the most serious ; not only is the absence of a fixed bath an obvious handicap, but the scullery sink becomes the only washing facility in the house. The absence of a proper hot water system with back boiler is again a wasteful and irksome feature, necessitating the installation of a gas geyser or electric storage heater over the scullery or kitchen sink as an alternative to heating water by the kettleful. Toilet accommodation almost invariably comprises a short hopper water closet situated in a dilapidated compartment in the back yard. Staircases are also a trying feature, being steep and dark, without adequate landings, and frequently possessing winder steps which are undoubtedly dangerous, particularly to children and old persons. Finally, but by no means least, the absence of a garden at front or rear adds to the general dreary picture.

Wallasey certainly has a slum problem, albeit not on the scale or accompanied by the same congestion as in some of our larger cities. The task of dealing with it is one of the most heartening aspects of our work.

The demolition of unfit dwellings should be concomitant with efforts to prevent the decay of other houses. The surveying of dwellings to ascertain the extent of defects, and the exercise of various powers under the Public Health and Housing Acts to effect remedies, is the foundation of the work of the Public Health Inspector. From the text of this Report it will be seen that 2,431 legal notices, requiring the carrying out of structural or other work, were complied with during the course of the year. The institution of legal proceedings proved necessary in a number of instances.

The year also witnessed important Council decisions in relation to the implementation of the Clean Air Act. In January, the Minister of Housing and Local Government sent a circular to all local authorities in England and Wales reviewing progress made in establishing smoke control areas. He described the progress as an encouraging first response but hoped it would now be possible to make faster progress, especially in removing the smoke pall from the "black areas" where air pollution is worst. The Minister asked that Councils in "black areas" should set a target year for the completion of the entire task, and prepare a phased programme for establishing smoke control areas over the next five years. My first Report entitled "Cleaner Air" was placed before the General Health Committee in June ; it set out facts concerning air pollution in Wallasey, described the smokeless fuels and their availability, discussed the conversion of heating appliances, included nine specimen smoke control schemes and examined the financial and staffing implications of a twenty years clean air development plan. This Report was approved by the Council, but a resolution was passed asking for a further Report upon the possibility of establishing a smoke-free Wallasey within a period not exceeding seven years.

This second Report was submitted to the General Health Committee in September, 1959. It was estimated that the cost of the complete programme would be of the order of one million pounds, shared between the local authority, the Exchequer, owners and occupiers. It was also pointed out that in addition to a Public Health

Inspector specialising in air pollution control, three temporary technical assistants would be necessary. The Report reminded members of the Council that using the estimates included in the 1954 Report of the Committee on Air Pollution, the collective cost of air pollution to the town is unlikely to be less than one million pounds each year. This second Report received the approval of the Council, and the necessary additional staff was immediately recruited. This policy decision has undoubtedly placed Wallasey in the first flight of progressive local authorities in this field.

During the year two Smoke Control Orders were made by the Council. One of these covers part of Moreton — an area of 125 acres including nearly 1,100 premises. The Order was confirmed by the Minister of Housing and Local Government after holding a public enquiry at which only one objector appeared. The other Order covers a 31 acre site at Moreton which is scheduled for development for private housing. The area contains 73 existing dwellings but no objections were made and the Order has been similarly confirmed. Wallasey has now three confirmed Smoke Control Orders, the first being the Church Street redevelopment area. In each case, time is allowed for the conversion of fireplaces before an Order comes into operation.

May I conclude with an expression of appreciation for the support received from both Chairman and Members of the General Health Committee. I am also very conscious of the goodwill and assistance which has invariably been forthcoming from the other officers of the Corporation and, in addition, my thanks are due to my Deputy, Mr. Ridgway, the Public Health Inspectors and clerical and other staff, for their loyalty, enthusiasm and hard work during the year.

Abatement of Nuisances and House Repairs

The year's work, in respect of the enforcement of house repairs, has followed the pattern of previous years. As a result of conflicting judgements given by the county courts in respect of appeals against notices served by various local authorities under section 9 of the Housing Act, 1957, reliance has been placed mainly on the nuisances provisions of the Public Health Act, 1936.

Complaints received during the year numbered 2,259, which is 241 less than for the previous year. The complaints and action arising out of them led to 17,374 visits being made to dwelling houses; 933 preliminary and 663 statutory notices were served. The summary of the contents of the notices indicates the effectiveness of the enforcement procedure. Legal proceedings were resorted to on 18 occasions.

	<i>Nuisances Detected</i>	<i>Nuisances Abated</i>	<i>Nuisances Out- standing</i>
Dwelling Houses			
Roof Repairs	324	453	151
Gutters and Spout Repairs	242	406	104
External Walls and Chimney Repairs ...	221	372	73
Installation of Damp Proof Courses ...	265	401	101
Dampness	74	144	23

Yards : Paving and Repairs	82	145	31
Internal Walls and Ceiling Repairs ...	267	424	69
Doors : Repairs and Renewal	83	85	33
Windows : Repairs and Renewal	181	250	42
Floors : Repairs and Renewal	95	150	41
Sub-floor Ventilation	3	4	—
Rooms : Cleaning and Redecorating ...	14	15	—
Passages and Staircases : Cleaning and Redecorating	4	3	1
Staircase Repairs	7	5	5
Handrails : Repairs and Renewal	8	7	3
Fireplaces & Flues : Repairs & Renewal	74	107	36
Cooking Stoves : Repairs and Renewal .	—	—	—
Sinks, Lavatories : Repairs and Renewal	21	21	15
Baths : Repairs and Renewal	—	—	—
Waste Pipes : Repairs and Renewal ...	66	93	11
Burst Water Pipe Repairs	65	73	11
Improvement and Reinstatement of Water Supply	14	14	—
Cleansing of W.C.s	11	10	4
W.C. Repairs and Renewals	284	444	59
Provision of Additional W.C.s	—	—	—
Soil Pipes : Repairs and Renewal	28	36	8
Disinfestation of Verminous Premises ...	1	4	—
Drainer Boards : Repairs or Renewal ...	16	14	6
Improvement of Ventilation	85	209	17
Total ...	2,535	3,889	844

	<i>Notices Served</i>	<i>Notices Abated</i>	<i>Notices Out- standing</i>
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General Environmental Public Health Nuisances

Removal of Offensive Accumulations ...	24	25	7
Cleansing of Ditches and Streams	1	1	—
Cinemas, Dance Halls : Contraventions .	3	3	—
Schools : W.C.s—Repairs and Renewal	1	1	—
Schools : Other Nuisances	—	—	—
Total ...	29	30	7

	<i>Served</i>	<i>Abated</i>	<i>Out- standing</i>
Total Number of Notices Served (all Acts)			
Preliminary	1,547	1,614	827
Statutory	668	717	166
Total ...	2,215	2,431	993

Legal Proceedings (Cases heard)	18
No. of Nuisance Orders applied for	10
No. of Nuisance Orders obtained	10
Total amount of fines and costs	£12 17 0
No. of prosecutions for non-compliance with Nuisance Order ...	Nil

FOOD HYGIENE REGULATIONS 1955 : CONTRAVENTIONS

	School kitchens and canteens	L.A. Hostels, Nurseries, etc.	Other L.A. Premises	Grocer's Shops	Cafes	Green- grocer's shops
Sinks to be provided... ..	—	—	—	6	4	1
Wash-hand basins to be provided ...	—	—	—	7	5	8
Provision for storage of special foods	—	—	—	—	3	—
Hot water to be provided	—	—	—	13	12	18
Walls, ceilings, windows, etc. to be repaired	—	—	—	8	2	8
Walls, ceilings to be cleansed or decorated	—	—	—	15	14	6
Floors to be repaired or cleansed ...	—	—	—	8	3	3
Hand-washing notices required ...	—	—	—	2	6	2
Drainer boards	—	—	—	—	1	—
Storage accommodation for outdoor clothing	—	—	—	6	4	10
Drainage to be improved	—	—	—	1	1	1
Precautions to be taken against contamination of food	—	—	—	29	33	35
First-aid boxes to be provided or improved	—	—	—	5	5	9
Soap, towels, nail-brushes required	—	—	—	2	3	3
Impervious surfaces to be provided	—	—	—	5	1	—
Other contraventions	3	—	—	36	13	26
TOTALS	3	—	—	143	110	130
Notices or memos issued	2	—	—	37	24	30
Total No. of premises in Wallasey	48	9	Included under Miscel- laneous	200	101	130

ED DURING THE YEAR 1959

Fishers' shops	Fried fish shops	Shellfish and Refreshment stalls	General shops	Food prep. premises	Wet fish shops	Chemists and Druggists	Club premises and canteens	Licensed premises	TOTALS
2	3	—	1	—	1	—	3	1	28
3	1	8	5	—	1	—	2	1	43
—	2	2	—	—	—	—	2	—	9
3	4	6	6	—	2	—	4	1	78
9	7	1	3	—	2	—	2	—	46
112	2	2	3	—	3	—	2	1	68
110	1	2	1	2	2	—	1	1	38
2	1	—	—	—	—	—	2	2	19
—	—	—	—	—	—	—	—	—	2
6	—	1	4	—	5	—	—	—	42
—	—	—	—	—	—	—	—	—	3
22	5	6	2	2	8	—	1	—	154
12	2	4	2	—	2	—	4	—	41
11	1	1	1	—	—	—	—	1	14
10	3	—	—	—	1	—	—	—	21
15	5	2	3	1	1	—	—	1	119
77	37	35	31	5	28	—	23	9	725
12	8	7	9	2	5	—	7	4	180
13	50	Included under Miscellaneous	110	14	29	43	Miscellaneous Total 82	96	1,273

In this classification, where premises are shared for the conduct of more than one type of trade, no account has been taken of trade unless it forms a substantial part of the business.

Inspections							Visits
Cafes, restaurants	..	..	..	..	..	..	237
Bakehouses	..	..	..	..	..	..	67
Fried Fish Shops	..	..	..	..	..	..	92
Offensive Trades	..	..	..	..	..	..	64
Other Food premises	..	..	..	..	..	..	1,528
School Meals Service	..	..	..	..	..	..	78
Licensed Premises	..	..	..	..	..	..	113
Total Visits							2,179

FOOD AND DRUGS ACT, 1955 : FOOD HYGIENE

Despite heavy demands made upon the time of the District Public Health Inspectors, it has been possible to maintain constant vigilance in this important field. The preceding table indicates the contraventions of the Food Hygiene Regulations detected during the year; figures alone, however, do not indicate the educational aspects of our work. It is through an educational process, constantly maintained, that good practices will eventually prevail throughout all food-handling activities.

Greater discrimination by the public in their choice of shops and restaurants, and more courage in quickly sending back the cracked cup or unclean fork, is undoubtedly needed. Consumers' choice is a powerful weapon in a relatively free economy, providing the choosing takes account of safety and cleanliness as well as price and quality. But even this has its limitations. The "back shop" or restaurant kitchen is not normally open to the public gaze, however discriminating that gaze may be. Here the responsibility falls upon the management and the individual employee, aided by the advice and guidance which the Public Health Inspector is able and willing to give.

As in previous years, a special effort was made to bring as many premises as possible in the New Brighton area up to standard before the season opened, followed by constant surveillance.

The year was also notable for the publication by the Ministry of Health and Ministry of Agriculture, Fisheries and Food of the first two Food Hygiene Codes of Practice. These relate to hygiene in the retail meat trade and the hygienic transport and handling of meat. When all the codes which are being prepared are published they will constitute a comprehensive "Highway Code" for the food-handling industries.

Registered Food Premises

The Minister of Health has requested that a classification of registered premises be included in this report. The required information is as follows :—

	<i>No. of Premises</i>	<i>No. of Visits</i>
List of Registered Food Premises, 1959		
Section 16 (a) Food and Drugs Act, 1955	543	373
Section 16 (b) Food and Drugs Act, 1955	144	109
	<hr/>	<hr/>
Total ...	687	482
	<hr/>	<hr/>

(N.B.—A classification of the types of premises registered under section 16 (a) is given in the part of the report dealing with ice cream).

Summary of Types of Food Premises Registered under section 16 (b) Food and Drugs Act, 1955

Bakehouses, Meat Pies	45
Meat Pies and Cooked Meats	19
Butchers, Sausages	45
Sausages and Cooked Meats	23

Grocers, Potted Meats	2
Boiled Hams	5
Cooked Meat Factories	2
Other Premises, Meat Pies	3

CONTROL OF ICE CREAM PREMISES

79 samples of ice cream were subjected to the methylene blue test: 3 of them were placed in Grade 3 and 5 in Grade 4 — the “unsatisfactory” grades. 20 samples were taken from 2 Wallasey manufacturers, 1 of which failed to reach the standard suggested by the Minister. About 6 samples were taken of each of the brands of ice cream manufactured outside the borough and 7 failed to comply with the desired standard. A summary of the gradings is given in succeeding pages. 396 inspections of ice cream premises were made; 23 of the visits being in respect of new registrations to sell ice cream.

ICE CREAM STATISTICS RELATIVE TO THE YEAR 1959

Registrations Approved during 1959

Sale only	—
Sale and Storage	20
Manufacture and Sale	1
	<hr/>
Total ...	21
	<hr/>

Registrations Refused 2

Registrations Cancelled Nil

Number of Premises on Register at close of Year

Storage and manufacture	4
Sale only	175
Storage only	3
Storage and sale	356
Manufacture, storage and sale	2
Manufacture and sale	3
	<hr/>
Total ...	543
	<hr/>

Visits of Inspection

Visits <i>re</i> applications for registration	23
Routine visits	373
	<hr/>
Total ...	396
	<hr/>

ICE CREAM SAMPLING, 1959

Classification of Samples by Location of Manufacturer

Ice Cream Manufactured in Wallasey

Grade	Methylene Blue (hours)					
	4½- hrs. or over	3½-4 hrs.	2½-3 hrs.	1½-2 hrs.	½-1 hr.	0- hrs.
1	17	—	—	—	—	—
2	—	2	—	—	—	—
3	—	—	—	1	—	—
4	—	—	—	—	—	—
Total	17	2	—	1	—	—

Ice Cream Manufactured outside Wallasey

1	46	—	—	—	—	—
2	—	6	—	—	—	—
3	—	—	—	2	—	—
4	—	—	—	—	—	5
Total	46	6	—	2	—	5

*Result classified according to identity of Manufacturer*Ice Cream sampled at point of sale within the
County Borough District of Wallasey during 1959

Factories outside Wallasey—Table I.

Manu- facturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manu- facturer by Ministry of Health recom- mended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satis- factory	Unsatis- factory
1	6	6	—	—	—	*	—
2	6	5	1	—	—	*	—
3	6	3	2	—	1	—	*
4	6	6	—	—	—	*	—
5	6	6	—	—	—	*	—
6	6	5	1	—	—	*	—
7	6	6	—	—	—	*	—
8	9	2	2	2	3	—	*
9	6	6	—	—	—	*	—
10	1	1	—	—	—	Not classifed Not classifed	
11	1	—	—	—	1		
	59	46 (78.0)	6 (10.1)	2 (3.4)	5 (8.5)	7 2 not classifed	2

Factories located in Wallasey—Table II.

Manu- facturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manu- facturer by Ministry of Health recom- mended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satis- factory	Unsatis- factory
1	12	10	2	—	—	*	—
2	8	7	—	1	—	*	—
	20	17 (85.0)	2 (10.0)	1 (5.0)	—	2 (100.0)	—

NOTES.—1. Figures in parenthesis denote percentages.

2. The manufacturers numbered 10 and 11 Table I above are not classified owing to insufficient number of samples taken.

ADMINISTRATION OF THE SHOPS ACT, 1950

There is one full-time shops inspector employed in this section of the department and all the provisions of the Shops Act are administered. To avoid duplication of visits the district public health inspectors enforce the Act in food shops, which they visit for other purposes. The shops inspector deals with other shops. Routine patrolling to check compliance with hours of closing and Sunday trading has been discontinued, visits only being made on receipt of complaints.

The health and welfare sections of the Shops Act were the main reason for the 4,132 routine visits made during the year. The general standard of compliance with these aspects of the Act continues to be good.

Nature of Contraventions remedied

Section 37 (1) Provision of seats for female employees	—
„ 38 (1) (a) Suitable and sufficient ventilation	1
„ (b) Maintenance of reasonable temperature	—
„ 38 (2) Provision of Sanitary Accommodation	7
„ 38 (3) Sanitary Accommodation cleansed and repaired	40
„ 38 (4) Provision of suitable and sufficient lighting	4
„ 38 (4) Provision of washing facilities	1
„ 38 (5) Provision of facilities for meals	—
Notices exhibited	265
Documents provided	139
General sanitary conditions improved	3

Hours of Employment

Contraventions detected and remedied —

Hours of Closing and Sunday trading

Number of contraventions noted	4
„ warnings issued	4
„ prosecutions instituted	—

HOUSING

One statutory notice, requiring the owner of a house to carry out repairs, was served under Section 9 of the Housing Act, 1957. This section is invoked only in special circumstances. In this instance, the work was not carried out by the owner, and in default the local authority executed the work and made arrangements for the recovery of the cost.

Rent Act, 1957

PART I: Applications for Certificates of Disrepair

(1) Number of applications for certificates	79
(2) Number of decisions not to issue certificates	—
(3) Number of decisions to issue certificates	
(a) in respect of some but not all defects	55
(b) in respect of all defects	24
(4) Number of undertakings given by landlords under paragraph 5 of the First Schedule	68
(5) Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	—
(6) Number of Certificates issued	16

PART II: Applications for Cancellation of Certificates

(7) Applications by landlords to Local Authority for cancellation of certificates	18
(8) Objections by tenants to cancellation of certificates ...	1
(9) Decisions by Local Authority to cancel in spite of tenants' objection	1
(10) Certificates cancelled by Local Authority	18

Summary of repairs executed on the 18 certificates of disrepair which were cancelled during the year

Roofs repaired	13
Gutters and Spouts repaired or renewed	14
External Walls and Chimneys repaired	28
Damp Proof courses provided	10
Dampness remedied	4
Yards paved and repaired	9
Internal Walls and Ceilings repaired	16
Doors repaired or renewed	28
Windows repaired or renewed	17
Floors repaired or renewed	16
Staircases repaired	—
Handrails repaired or renewed	2
Fireplaces and Flues repaired or renewed	10
Sinks or Lavatory Basins repaired or renewed	—
Baths repaired or renewed	1
Waste Pipes repaired or renewed	3
Burst Water Pipes repaired	3
W.C.s cleaned	—
W.C. repairs and renewals	15

Soil Pipes repaired or renewed	2
Drains repaired	2
Drainer Boards repaired or renewed	—
Lighting and/or Ventilation improved	13
Miscellaneous repairs	10
External decorations	11
	<hr/>
Total ...	227
	<hr/>

Clearance and demolition of unfit houses

Work continued throughout the year on the clearance of the houses in the Council's five-year programme. The work is necessarily arduous and the procedure protracted, involving detailed inspection, the service of notices and, where objections are lodged, the conducting of a public local inquiry by an inspector of the Ministry of Housing and Local Government. The following orders, etc., were made during the year :—

Demolition Orders

- 2 Glenburn Road.
- 46 Bermuda Road.

Demolition by Voluntary Undertakings

- *74 Cobham Road.
- *123 Cobham Road.
- *“ Leonmoor,” Ditton Lane.
- 10 Edgehill Road.
- *2 Glasier Road.
- *36 Pinetree Grove.
- “ Oakdale,” Millhouse Lane.
- *“ Moyglare,” Sandbrook Lane.
- “ Doonholme,” Millhouse Lane.
- 42 Bermuda Road
- 187 Leasowe Road.
- 1 Central Cottage, Wallasey Village.
- 2 Central Cottage, Wallasey Village.
- “ Meadow View,” Meadowbrook Road.
- 63 Bermuda Road.
- *“ Wavecrest,” Leasowe Road.
- 48 Meadowbrook Road.
- 44 Bermuda Road.
- 6 Glasier Road.
- 23 Lingham Lane.
- 4 Hill Grove.
- *5 Hill Grove.
- 6 Hill Grove.
- *7 Hill Grove.

“ Peel Cottage,” Rowson Street

1 Snowden Road.

7 Burden Road.

Closing Orders

19 Egerton Street.

Closure by Voluntary Undertakings

“ Seaview Cottage,” Moreton Common.

10 Tobin Street.

“ The Grennan,” St. George’s Mount (basement rooms).

Certificates of Unfitness

*75–81 Union Street.

4–10 Rossett Place.

**Actual demolition of building was completed during the year.*

Compulsory Purchase Orders

The Wallasey (Clearance No. 93) Mount Pleasant Road Compulsory Purchase Order comprised the following premises, together with adjoining land :—

1, 3, 4, 6 Albert Terrace.

7, 9, 11, 13, 15 Mount Pleasant Road.

A public local inquiry was held on 18th February, 1959 to consider objections. The Order was confirmed without modification on 27th April, 1959, and became operative on 18th June, 1959.

The Wallasey (Clearance No. 95) Union Street Compulsory Purchase Order comprised the following premises, together with adjoining land :—

87–97, Union Street.

1, 2, 3, 4 Union Crescent.

The owner of six of the houses objected on the grounds that the properties were not unfit. An inquiry was held on 29th September, 1959 to consider the objections. The Order was confirmed without modification on 31st December, 1959.

The Wallasey (Clearance No. 96) Greenfield Street/Rossett Place Compulsory Purchase Order comprised 62 houses, together with adjoining land. There were no objectors and the Order was confirmed without modification on 3rd December, 1959.

Progress Report of Action under Housing Acts, 1930-1957

Position as at 31st December, 1959

	No. of dwelling houses demolished		Number of persons displaced
	Unfit	Other	
(1) Land coloured “ pink ”	996	—	2,558
(2) Land coloured “ grey ”	—	9	41

Unfit Houses not included in Clearance Areas

	Number of houses	Number of persons displaced
(1) Housing Act, 1957—		
(a) Houses demolished as a result of formal procedure under Sec. 17 (1)	299	992
(b) Houses demolished as a result of informal notices preliminary to formal procedure under Sec. 17 (1)	154	388
(c) Local Authority owned houses subject to certificates of unfitness	15	45
(d) Houses closed in pursuance of an undertaking given by the owners under Sec. (17)	11	33
(e) Parts of buildings closed (Sec. 18)	20	41
(f) Houses made fit—		
(i) as a result of formal notices under Sections 9 to 12	256	—
(ii) as a result of informal notices preliminary to formal procedure under Sections 9 to 12	851	—
(1) Housing Act, 1957—		
(g) Closing Orders made under Section 17 ...	3	14
(h) Demolition Orders determined and Closing Orders substituted under Section 26	—	—
(i) Demolition Orders quashed under Section 24	—	—

Overcrowding and Allocation of Tenancies

The Council continued to operate its Group-plus-Points Scheme for re-housing. During the year the overcrowding and the sub-tenants' groups were amalgamated. Re-housing of families from unfit houses remains outside the points scheme. The following summary shows the shares of lettings now in force.

Overcrowded tenants and sub-tenants)	
and not overcrowded sub-tenants)	85%
Health	12%
Emergency	3%

All overcrowding cases must have been overcrowded for at least one year to obtain the extra points allocated for overcrowding.

During the year, the housing circumstances of 554 families were investigated in connection with housing applications, 347 of these as a result of applications for inclusion in the Overcrowded group. 139 families were found to be overcrowded for the purposes of the points scheme, which employs a standard better than that of the Housing Act.

Applications for rehousing on health grounds showed a decrease of 34 on the previous year. 207 applications were considered and these are analysed below. It is only possible for the most urgent cases to be recommended for rehousing, and only 24 applicants in this class received the approval of the Medical Officer of Health. In 6 of these

instances, the illness giving rise to the need for rehousing was pulmonary tuberculosis, somewhat fewer than in the previous year. The bulk of the applications came from persons suffering from old age, arthritis and high blood pressure. These cases all require ground floor accommodation.

Housing Applications, 1959

Analysis of 554 families investigated as a result of references from Housing Department.

	Overcrowded		Notover. crowded Points Scheme	Applications on Medical Grounds			
				Tuberculosis		Other Cases	
	Housing Points Act, 1936 Scheme			Approved	Rejected	Approved	Rejected
Ten- ants	16	41	148	5	14	11	82
Sub- Ten'ts living in r'ms	29	98	60	1	10	7	77
Totals	45	139	208	6	24	18	159

Provision of New Houses

The Borough Architect has provided the following report on the provision of new housing accommodation : —

	During 1959	Post-War Period incl. 1959	In Progress 31/12/59
Houses erected by private enter- prise	135	1,629	60
Units of accommodation erected by Local Authority under Housing Acts	173	3,598	161
Tenant Ownership Houses erected by Local Authority ...	—	162	12

INSPECTION OF FACTORIES

The number of factories on the register at the end of the year was 279, a decrease of 1 compared with the figure for 1958. 711 visits were made. An abstract of the results of these inspections in the form required by the Ministry of Labour and National Service is set out below :—

Administration of the Factories Act, 1937

Inspections for Purposes of Provisions as to Health

Premises	No. on Register	Number of	
		Inspections	Written Notices*
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced	6	18	—
Factories not included in above in which Section 7 is enforced by the Local Authority	246	677	13
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises) ...	27	16	1
Totals	279	711	14

*In addition 35 verbal notices were given to occupiers regarding various matters.

Cases in which defects were found

Particulars	Found	Remedied	Referred	
			To H.M. Inspector	By H.M. Inspector
Want of cleanliness (S.1)	—	2	—	—
Overcrowding (S.2)	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—
Sanitary Conveniences (S.7) :—				
(a) Insufficient	2	2	—	1
(b) Unsuitable or defective .	56	57	—	3
(c) Not separate for sexes ...	1	1	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—
Totals	59	62	—	4

Outwork

Wearing apparel-making, etc.	Number of outworkers in Aug. list required by section 110 (i) (c)	2
	Visits made	4

WATER SUPPLY

Town Area Supply

Quantity

The total consumption of water in the town area represented 38·4 gallons per head per day, of which 28·7 was for domestic purposes, 0·4 gallons for shipping, 9·28 gallons for industry and commerce, and for the Cleansing Department 0·02 gallons.

Source and Treatment

Water is obtained from three sources — a bulk supply from Birkenhead Corporation's Lake Alwen, a supply from the River Dee works owned jointly by Birkenhead and Wallasey Corporations and the remainder obtained from deep boreholes within the borough.

The borehole water is softened by the base exchange process and chlorinated. The Alwen bulk supply is treated by the Birkenhead Corporation before delivery. This treatment includes coagulation, filtration, pH correction and chloramine dosing. The River Dee supply receives similar treatment except that sterilisation is by superchlorination and dechlorination. Activated carbon treatment is used as necessary to control tastes.

Chemical and Bacteriological Examination

146 samples were submitted to bacteriological examination by the Water Department, of these 21 gave presumptive positive results but none gave positive results to confirmatory tests.

34 samples were submitted to routine chemical analysis by the Water Department. These samples and those taken for bacteriological examination were taken at random from premises supplied throughout the area. In addition, samples are tested daily for hardness giving the following average results :—

Gorsehill Reservoir	...	...	...	115 p.p.m.
Poulton & Moreton supplies	...			59 p.p.m.

TYPICAL CHEMICAL ANALYSES — 1959

	A	B
Total Hardness	135 p.p.m.	62.5 p.p.m.
Total Solids	334 p.p.m.	132 p.p.m.
Nitrogen as Ammonia	0.01 p.p.m.	0.01 p.p.m.
Nitrogen as Albuminoid Ammonia	0.02 p.p.m.	0.03 p.p.m.
Oxygen consumed		
4 hrs. at 37° C.	1.4 p.p.m.	1.2 p.p.m.
Chlorides	116 p.p.m.	15 p.p.m.
Nitrogen as nitrates	1.0 p.p.m.	0.7 p.p.m.
pH Value	7.0	7.4
Colour (Hazen)	5	24

General : The waters were wholesome, clear and odourless. Lead and copper absent. Occasional trace of iron.

A = Water supplied in "Old" Wallasey, except Seacombe and Poulton.

B = Water supplied in Poulton, Seacombe, Moreton and Leasowe.

Results of 39 samples taken by public health inspectors of untreated water at the borehole in Seaview Road and submitted to the Public Health Laboratory Service are as follows ;—

Details of Bacteriological Samples

TOWN AREA SUPPLY

(i) Borehole at Seaview Road

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	29	38	39
1-4	5	1	—
5-9	3	—	—
10-25	1	—	—
26-105	1	—	—
	39	39	39

72 samples were taken by public health inspectors from taps of premises within the town area. The sample containing faecal coli was repeated and the water was then found to be satisfactory. A summary of the results is given in the following table :—

(ii) Random Distribution Points

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	37	60	71
1-4	29	11	1
5-9	2	—	—
10-20	3	1	—
21-50	1	—	—
51-100	—	—	—
	72	72	72

One sample of the town supply taken by a public health inspector was submitted for full chemical examination. The result was as follows :—

Analytical results expressed in parts per million :—

Total solid matter in solution	383.6
Oxygen required to oxidise in 15 minutes	0.32
4 hours	0.44
Ammoniacal nitrogen as N.	0.03
Albuminoid nitrogen as N.	0.02
Nitrous nitrogen as N.	None

Nitric nitrogen as N.	1.8
Combined chlorine	129.0
Total Hardness	127.0
Iron	0.08
pH value 6.9	

The water was found to be free from pollution and suitable for drinking and domestic purposes.

Saughall Massie Supply

Dwelling houses in the extreme western end of the borough receive their water supply from the West Cheshire Water Board. This water is obtained from deep wells at the Board's pumping stations and river supply taken from the River Dee at Chester and treated at the Board's Sutton Hall Treatment Works, Great Sutton. On the basis of consumption throughout the entire area supplied by the Board, the total consumption per head per day is 53 gallons, of which 19 gallons are for industry and commerce.

During the year 73 samples of water from the pumping stations were submitted by the Board to the Counties Public Health Laboratories, London, S.W.1, for bacteriological examination.

The following table gives a summary of the results of the 25 samples taken from the Prenton Pumping Station.

No. of Colonies (on Agar)	No. of Samples		
	3 days at 20°C.	1 day at 37°C.	2 days at 37°C.
0	8	21	19
1-4	13	3	5
5-9	1	—	—
10-20	1	1	1
21-50	1	—	—
51-60	1	—	—
	25	25	25

An average of three chemical examinations of the water taken from Prenton Pumping Station is as follows (results in parts per million) :—

Appearance	Clear—Bright
Colour	Nil
Turbidity	Nil
Odour	Very slightly Chlorinous
pH reaction	7.166
Electric conductivity	591.66
Chlorine present as Chloride	80.0
Hardness : Non-carbonate	78.33
Carbonate	176.66
Total Hardness	255.00
Nitrate Nitrogen	3.33

Ammoniacal Nitrogen	0·015
Albuminoid Nitrogen	0·000
Free Carbon Dioxide	23·00
Total Solids	395·0
Alkalinity as Calcium Carbonate	176·6
Nitrate Nitrogen	Absent
Oxygen absorbed	0·083
Residual Chlorine	0·04
Iron	Absent
Zinc	Absent
Manganese	Absent
Other Metals	Absent

During the year 22 samples of water were taken by public health inspectors and submitted to the Public Health Laboratory Service, Birkenhead, for bacteriological examination.

Details of Bacteriological Samples

West Cheshire Water Board

*Samples taken by public health inspectors
at selected distribution points*

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	7	14	22
1-4	14	7	—
5-9	1	1	—
10-20	—	—	—
21-50	—	—	—
51-100	—	—	—
	22	22	22

One sample of water supplied by the West Cheshire Water Board was taken by a public health inspector and submitted for full chemical examination. The result was as follows :—

Analytical results expressed in parts per million :—

Total solid matter in solution	182·4
Oxygen required to oxidise in 15 minutes	0·20
4 hours	0·32
Ammoniacal nitrogen as N.	0·01
Albuminoid nitrogen as N.	0·02
Nitrous nitrogen as N.	None
Nitric nitrogen as N.	1·5
Combined chlorine	29·1
Total hardness	85

Hardness (non-Carbonate)	35
Hardness (Carbonate)	50
Iron	0.16

pH value 7.2

SEWERAGE AND DRAINAGE

House Drainage

Visits by public health inspectors in connection with same ...	740
Drains cleansed from obstruction after service of notice ...	131
Minor repairs effected to existing drains	27
Entire reconstruction of existing drains	2
Partial reconstruction of existing drains	20
Drain Tests : (a) Smoke	14
(b) Water	5
(c) Colour	33

The following sewerage works have been carried out during the year 1959 :—

- (1) A 9" storm relief sewer 50 yards in length was constructed in Ash Grove at an estimated cost of £500.
- (2) The sewer in St. John's Road was extended by 35 yards to relieve flooding which has occurred over a number of years at 30, St. John's Road. The cost of this work in 6" diameter pipes was £180.
- (3) Extensive repairs have been carried out to the sewer in Wellington Road at a total cost of £480.
- (4) In order to relieve flooding occurring at 2 and 4 Meadowbrook Road, a large non-return valve was fitted in Harlian Avenue, at a cost of £110.
- (5) A number of brick and other sewers have been photographed during the year in order to determine their condition.
- (6) A length of ditch to the south of Southbourne Road 145 yards in length has been piped with 9" diameter porous concrete pipes at a cost of £50

Cesspools emptied after service of notice	—
Cesspools repaired	—
Cesspools abolished	—
Ditches and watercourses inspected	10
Ditches and streams cleansed	1
Ditches and streams—pollution remedied	—

RODENT CONTROL

Sewer Maintenance Treatments

Two routine sewer maintenance treatments were again carried out using zinc phosphide and arsenic as the rodenticides. In addition, a further sewer treatment was carried out using Warfarin.

Prior to the first routine treatment involving the use of zinc phosphide, a 10% test baiting of 586 manholes was undertaken. The number of takes—7 complete and no partial—is a measure of the success of the work previously done. 45 manholes were baited as a result of the test and 6 partial takes were recorded. The second routine treatment involved baiting 49 manholes ; 7 complete and 1 partial takes were recorded.

499 manholes were treated with Warfarin and 15 takes (3 complete) were recorded.

During the second Warfarin treatment, 56 manholes were baited. No takes were recorded.

Surface Infestations

During the year 400 complaints of surface infestation were received compared with 375 in 1958. Details of the inspections and treatments carried out are given below in the form required by the Ministry of Agriculture, Fisheries and Food. 515 separate treatments were carried out at 445 premises by rodent operatives of the Public Health Department. 396 of these premises were treated once in the year, while reinfestation involving two treatments occurred in 34 premises ; three treatments were required at 12 premises, four treatments at 2 premises and 7 treatments at 1 premises. The multiple treatments were invariably due to reinfestations. Warfarin has come to be accepted as the basic rat poison. During the year it was used in all except 1 of the 515 treatments by council rodent operatives. Re-inspections have been carried out on the first, third, seventh, eleventh and fourteenth days, a system which was discussed in the annual report for 1952.

	Type of Property				
	Local Authority	Dwelling-houses	Agricultural	All other (incl. Business & Industrial)	Total
I. Total number of properties in Local Authority's District ...	227	31,298	55	3,820	35,400
II. Number of properties inspected by the Local Authority as a result of (a) notification or (b) survey under Damage by Pests Act (c) otherwise, i.e. when visited primarily for some other purpose ...	(a) 30	288	2	80	400
	(b) 15	715	2	68	800
	(c) 408	11,944	Nil	7,734	20,086
III. Number of properties (under II) found to be infested by rats ...	Major 1	Nil	Nil	1	2
	Minor 22	148	2	31	203
IV. Number of properties (under II) found to be seriously infested by mice ...	14	184	Nil	56	254
V. Number of infested properties (under III & IV) treated by the Local Authority ...	37	324	2	82	445
VI. Number of notices served under Section 4:					
(1) Treatment ...	Nil	Nil	Nil	Nil	Nil
(2) Structural Works (i.e., Proofing) ...	Nil	Nil	Nil	Nil	Nil
Total ...	Nil	Nil	Nil	Nil	Nil
VII. Number of cases in which default action was taken by Local Authority following issue of notice under Section 4	Nil	Nil	Nil	Nil	Nil
VIII. Legal Proceedings ...	Nil	Nil	Nil	Nil	Nil
IX. Numbers of "block" control schemes carried out ...	—	—	—	—	6

NOTES

Note 1. A property means a property separately entered in the Valuation Roll for the area.

Note 2. Council houses are included under Dwelling Houses. Premises used by Local Authority for purposes of trade are included under Business or Industrial Premises.

Sewers are not included.

Only properties devoted to agricultural or horticultural production are included under Agricultural Properties. Combined dwelling and business premises where occupied by the same person are included under Business Premises, otherwise they are entered separately.

Note 3. II, III, IV and V excepting II (c) relate to the number of properties inspected as defined in Note 1 and not to the number of inspections, infestations or treatment at each property.

PUBLIC HEALTH CONTROL OF SWIMMING POOLS

Swimming facilities in Wallasey include the indoor baths at Guinea Gap, the outdoor pools at New Brighton Bathing Pool and Derby Bathing Pool at Harrison Drive. In each case, sea water is used, the water being pumped from the River Mersey for Guinea Gap Baths, from the Marine Lake for New Brighton Pool and from the Irish Sea for the Derby Bathing Pool. During operation, the swimming bath water undergoes a constant filtration process utilising Bell's Gravity Filters and modern chlorination equipment is used to ensure a safe and sterile water. The turnover period at Guinea Gap is once every three hours and at the two outdoor pools once every five hours. Guinea Gap Baths remain open for public use throughout the year and the water is heated ; the two outdoor pools are only in use during the summer months and the water is not heated..

80 visits of inspection were made to the council's swimming baths by public health inspectors, compared with 37 in 1958. Tests for residual chlorine amounted to 43, samples for bacteriological examination numbered 151, or 80 more than during the previous year.

At Guinea Gap first class bath 11 tests for chlorine were made, the average result being 0.81 parts per million at the inlet and 0.55 parts per million at the outlet. The corresponding averages of 13 tests at the 2nd class bath were 0.90 and 0.70 parts per million.

The maintenance of residual chlorine in the open air pools at New Brighton and Harrison Drive is more difficult. At New Brighton pool the average of 9 checks gives inlet contents of 0.4 parts per million on the east side and 0.3 on the west side, with only 0.1 at the outlet. At Derby Pool 10 tests were done and the average residual chlorine was 1.0 and 0.3 parts per million at the inlet and centre of the pool, with only a trace at the outlet. The results of the chlorine tests at the different pools are consistent with the results of bacteriological examinations of the water, details of which are tabulated below :—

Derby Pool

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	14	22	22
1-4	10	—	2
5-9	—	3	1
10-19	1	—	—
20-49	—	1	1
50-99	—	—	—
100+	1	—	—
	26	26	26

New Brighton Pool

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	15	24	25
1-4	6	2	1
5-9	4	—	—
10-19	—	—	—
20-50	1	—	—
	26	26	26

Guinea Gap Baths

No. of Organisms	No. of Samples		
	1 day at 37°C.	Pres. Coli.	Bact. Coli. (type 1)
0	43	99	99
1-4	30	—	—
5-9	6	—	—
10-19	10	—	—
20-49	7	—	—
50-99	2	—	—
136	1	—	—
	99	99	99

Chemical Examination — Specimen Analysis

Guinea Gap 2nd Class Bath

Analytical results expressed in parts per million :—

Total solid matter in solution	28,180.0
Oxygen required to oxidise in 15 minutes	0.42
4 hours	0.74
Albuminoid nitrogen as N.	0.20
Ammoniacal nitrogen as N.	0.02
Nitrous nitrogen as N.	None
Nitric nitrogen as N.	None
Combined chlorine	14,200.0
Free Chlorine	0.44
Alkalinity	217.0
pH value	7.6
This water is quite satisfactory for swimming bath purposes,	

AIR POLLUTION

Industrial Smoke

In Wallasey, the more limited problem of industrial smoke is receiving continual attention. The number of smoke observations increased substantially over the previous year. On the 1st June, 1958, The Dark Smoke (Permitted Periods) Regulations came into operation, giving the local authority vastly improved powers to control smoke emissions and prosecute offenders. Later in that year, special Regulations were published in relation to smoke from shipping, the enforcement of which became the responsibility of the Liverpool Port Health Authority. Following approaches by Public Health Inspectors, several firms considered alternative methods of firing. The result was an even greater swing to oil-firing methods. Towards the end of 1959 the Ministry of Housing and Local Government published new Regulations relating to mechanically-fired furnaces included in smoke control areas. The effect of these is to authorise the use of bituminous coal in industrial plant situated in smoke control areas, provided it is fired with suitable mechanical equipment. The same concession has thus been granted to coal-fired plant as was granted to oil-fired plant in 1957, and it may have some effect in retarding conversions to oil-firing. The new Order has given rise to misgivings in some quarters, but in my own view oil and coal, neither of which are inherently smokeless, could not be excluded from smoke control areas without eventually creating a serious crisis and in the meantime considerably increasing the difficulties of introducing smoke control areas.

Summary of Observations and Visits

No. of formal (half-hourly) smoke observations	164
No. of casual smoke observations	354
No. of visits to boiler-houses	62
No. of interviews	109
No. of nuisances abated	1
No. of boiler plants improved	2
No. of visits to deposit gauges	72
No. of visits to proposed smoke control areas	523

Measurement of Air Pollution

It is difficult to exaggerate the importance of the scientific measurement of air pollution, for this reveals not only monthly and seasonal variations, but long-term changes as well. The readings from a sufficient number of gauges and instruments allow the size of the problem to be appraised and compared and the effects of abatement programmes measured. About seven in every eight of the "black area" authorities maintain measuring apparatus; in "other areas" less than half do so. In Wallasey four deposit gauges are maintained for the measurement of soot-fall, and five gauges for measuring the concentration of sulphur in the atmosphere.

TABLE 1

Station	Rainfall		Total Dissolved Matter		Total Undissolved Matter		Total Solids	
	M.M.		Tons per sq. mile per month					
	Wint.	Sum.	Wint.	Sum.	Wint.	Sum.	Wint.	Sum.
Oakdale Road Oct., 1958— March, 1959	56		8.15		11.40		19.55	
April, 1959— Sept., 1959		50.1		5.73		11.65		17.38
Gorsedale Road School Oct., 1958— March, 1959	55		8.19		9.07		17.26	
April, 1959— Sept., 1959		50.4		4.67		7.49		12.16
Saughall Massie Oct., 1958— March, 1959	37		2.75		3.01		5.76	
April, 1959— Sept., 1959		50.5		2.91		2.93		5.84
Seaview Road Oct., 1958— March, 1959	54		7.47		7.74		15.21	
April, 1959— Sept., 1959		52.3		5.55		5.94		11.49

Table 2

Mean Monthly Rates of Total Deposits for Winter and Summer Periods
October, 1958—September, 1959

Town	Station	Total Solids	
		Tons per sq. mile per month	
		Winter	Summer
Wallasey	Oakdale Road	19.55	17.38
	Gorsedale Road School	17.26	12.16
	Saughall Massie	5.76	5.84
	Seaview Road	15.21	11.49
Manchester	Philips Park	21.01	20.60
Liverpool	Aigburth Vale	8.98	8.34
Brixham	Rea Barn	7.1	5.52

Table 3

Estimation of Sulphur Dioxide by the Lead Peroxide Method for
Winter and Summer Periods, October, 1958—September, 1959.

Rate of Absorption of Sulphur Dioxide expressed as
 $\text{Mg.SO}_3/\text{day}/100 \text{ Cm}^2$.

Station	Winter Period	Summer Period	Oct., 1958 Sept., 1959
Oakdale Road Oct., 1958—March, 1959 April 1959—September, 1959	4.04	1.73	2.88
Gorsedale Road School Oct., 1958—March, 1959 April, 1959—September, 1959	3.98	1.80	2.89
Saughall Massie Oct., 1958—March, 1959 April, 1959—September, 1959	1.38	1.04	1.21
Seaview Road Oct., 1958—March, 1959 April, 1959—September, 1959	3.85	1.58	2.71
Town Hall, Wallasey Oct., 1958—March, 1959 April, 1959—September, 1959	8.92	3.41	6.16
Bitterne Reservoir, Southampton Oct., 1958—March, 1959 April, 1959—September, 1959	1.25	0.49	0.87

NOTE

- (1) In the above classification the figure for the winter period consists of an average of the recordings for the months of October, 1958, to March, 1959. The figure for the summer period consist of an average of the recordings for the months of April, 1959, to September 1959.
- (2) The Philips Park Station records the greatest degree of pollution of a number of stations in Manchester; it is situated in close proximity to large scale electricity, gas and colliery undertakings in addition to many other works from which atmospheric pollution may arise.

Average Total Deposit Per Square Mile of the Borough Per Year
October, 1958—September, 1959—154.21 tons

Smoke Control Areas

The general development of the Council's policy in relation to this relatively new and important subject has been reviewed in my Introduction. Wallasey has now three confirmed Smoke Control Orders, as follows :—

Name of Order	Acres	No. of Dwellings	No. of other Premises	Date of Operation
The Wallasey (Church St.) Smoke Control Order No. 1, 1958	11	218 (when completed)	4	1st October, 1959
The Wallasey (Moreton) Smoke Control Order No. 2, 1959	125	1,070	25	1st September, 1960
The Wallasey (Upton Rd.) Smoke Control Order No. 3, 1959	31	241 (when completed)	6 (when completed)	1st October, 1960

In addition, it is the Council's policy that all new tenants on new estates should use only smokeless fuels, and this requirement has formed part of new tenancy agreements where appropriate.

DISINFESTATION

Benzine hexachloride in kerosene has been used for the majority of infestations of cockroaches. In addition to the work done by the Corporation's operator, details of which are set out below, surveillance was exercised over the hydrogen cyanide fumigation of a private dwelling house for the eradication of wood beetle.

Disinfestation

Inspections

(1) No. of complaints investigated	222
(2) No. of private houses inspected as a result of (1)	120
(3) No. of local authority houses inspected as a result of (1)	56
(4) No. of premises other than dwelling houses inspected as a result of (1)	46
(5) No. of premises found to be verminous :	
(a) Bed Bugs	34
(b) Fleas	27
(c) Cockroaches	89
(d) Other Vermin	72

Notices Served and Abated

	<i>Served</i>	<i>Treated By L.A.</i>	<i>Abated Privately</i>
(6) Total No. of notices to disinfect given verbally	3	—	3
(7) Total No. of preliminary notices in writing	8	2	6
(8) Total No. of statutory notices ...	3	—	3
	<hr/> 14	<hr/> 2	<hr/> 12

Treatment by Council's Operative

(9) No. of treatments on repayment	372
(10) No. of treatments without charge	8
	<hr/>
(11) Total No. of treatments	380
	<hr/>
(12) No. of premises covered by treatments outlined in (11)	222
	<hr/>
(13) No. of treatments with D.D.T. spray	70
(14) No. of treatments with other spray insecticides	307
(15) No. of treatments with other methods	3
	<hr/>
	380
	<hr/>
(16) Fees received, £212 9s. 11d.	

RAG FLOCK AND OTHER FILLING MATERIALS ACT

During the year 5 samples were submitted to prescribed analysis, and were found to comply with the prescribed standards of cleanliness.

Type of Filling Material

B.S.S. 1425 : 1951	<i>No. of Samples</i>
Cotton Felt	2
Rag Flock	—
Washed Flock	—
Coir Fibre	3
B.S.S. 1762 : 1951	
Woollen Mixture Felt	—

Seven premises are registered under the Act. In the main they are occupied by upholsterers whose main business is the repair or refilling of upholstered articles of furniture.

CONTROL OF CAMPING

174 visits were made to licensed sites during the year.

Seven private sites were licensed from the end of March until the first week in October. Licences were also granted in four cases for the stationing of single caravans on land for short periods. In addition to the above, branches of the Caravan Club held two camps on land situated on the promenade which is owned by the Corporation.

No. of licences relating to sites issued during 1959	11
No. of licences relating to sites refused during 1959 ...	2
No. of cases of unlicensed camping detected during 1959 .	4
No. of visits to unlicensed land	49
No. of visits to licensed land	174
Inspection of structures	3,878
Nuisances abated after notice	—

KEEPING OF ANIMALS AND PET SHOPS

One application for transfer of licence was received and approved. The total number of pet shops is 17, which is a disproportionately high number for the size of the town. All the licences are subject to standard conditions approved by the Council. These conditions are based on local conditions, regard having been paid to recommendations of the Association of Municipal Corporations and the R.S.P.C.A.

Visits to pet shops	37
Visits to other premises	67
Notices served	—
Stable manure pits, cleansed	—
Stable manure pits, repaired or renewed	—
Piggeries cleansed or whitewashed	—
Piggeries repaired or reconstructed	—
Other animal nuisances abated	—

MISCELLANEOUS INSPECTIONS

	<i>Visits</i>	<i>Notices served</i>	<i>Nuisances detected</i>
Schools	63	—	1
Cinemas, dance halls, etc.	38	—	3
Sub-let rooms	40	—	—
Public conveniences	187	—	8
Local Land Charges (search)	2,006	—	—
Measurements of rooms for permitted numbers	549		
Interviews with building contractors .	445		
Offensive trades	64		
Canal boats inspected	—		
Other Visits	3,413		

PART VI.

Welfare Services
(*National Assistance Act, 1948*)

WELFARE SERVICES 1959

Residential Accommodation

Once again the three Hostels for Old People—"Lamorna," "Redcliffe" and "Newholme"—were filled to capacity during the year, the need being so desperate that in some cases the normal capacity of the Hostels was exceeded by several beds. As usual any vacancies were filled immediately.

At the end of the year there were 105 people on the Waiting List for hostel accommodation, compared with 100 at the beginning.

To ease the situation the Welfare Committee hope to open, during the ensuing year, a newly-built 50-bedded hostel, for the more infirm. It is also hoped to open a further 18-bedded hostel in the near future.

The following are the statistics relating to accommodation provided by or on behalf of the Council in 1959.

	<i>No. resident on 1.1.59</i>	<i>Admissions during 1959</i>	<i>Discharges during 1959</i>	<i>No. resident on 31.12.59</i>
"Newholme"	39	19	13	45
"Lamorna"	19	11	11	19
"Redcliffe"	18	15	16	17
David Lewis Epileptic Colony ...	3	—	—	3
Home for Epileptics, Maghull ...	5	1	—	6
Turner Memorial Home of Rest for Cripples, Liverpool	7	1	2	6
Alne Hall, York	1	—	1	—
Maryland, Formby	1	—	—	1
Holm Hill, West Kirby	4	—	1	3
Southlands, Penketh	1	—	1	—
Salvation Army Home, Wicksted Hall	1	—	1	—
Old People's Hostel, Liverpool .	1	—	—	1
Leeds House, New Brighton ...	—	1	—	1
"Springhill," Nelson	—	1	—	1
Middleton Home for the Blind, Maldon, Essex	—	1	—	1
Charles Best House (Diabetics), Parkgate	2	1	2	1
St. Vincent's Hospice, Liverpool	—	1	—	1
Tithebarn, Crosby	—	1	—	1
British Legion Home, "Cromer" Norfolk	—	1	—	1
Methodist Home for the Aged, Fulwood Park, Liverpool ...	—	1	—	1
Reception Centre, Martins Lane	—	152	141	11
4, Tower Street, Lower Flat ...	4	5	4	5
4, Tower Street, Upper Flat ...	4	3	4	3
8, Tower Street, Lower Flat ...	4	6	4	6
8, Tower Street, Upper Flat ...	4	4	4	4
8, Church Road, Flat A	6	—	—	6

8, Church Road, Flat B	4	—	1	3
8, Church Road, Flat C	4	6	5	5
10, Church Road, Flat A	5	6	5	6
10, Church Road, Flat B	7	4	6	5
10, Church Road, Flat C	6	6	6	6
Totals	150	247	228	169

Temporary Accommodation

The accommodation under this heading provided by the Council and consisting of (a) 10 sub-standard flats in Tower Street and Church Road, and (b) a Reception Centre at 51, Martins Lane, has been constantly used during the year. The flats have always been full. If any became vacant there was always a family in need to be moved in.

The Reception Centre once again was busy throughout the year, being full to capacity on occasions.

It is obvious that even more accommodation of this type is required if the Welfare Committee is to carry out its duties to help the homeless.

Alternatively, more speedy rehousing from temporary accommodation by the local authority would relieve the situation. It is the intention of the Housing Department to provide "intermediate" accommodation which in some degree will also help.

During the year shelter was given to no fewer than 152 people at the Centre.

All the people in the above units are reminded periodically that they are only occupying temporary accommodation and must make constant efforts to find alternative housing. Unfortunately in many cases, particularly where there are children, it is almost impossible for them to do so due to the continued shortage of houses to rent.

15, Percy Road

This property is still occupied by the family who took up residence there last year. There does not appear to be any other accommodation available to house this family due to its large size.

Registration of Old Persons' Homes

There were at the end of 1959 five homes in Wallasey registered under the provisions of the National Assistance Act, 1948.

Removal of Persons in need of Care and Attention (Section 47, National Assistance Act, 1948)

During the year two elderly women who were unable to look after themselves, and who had no-one to look after them, were removed from their homes under Magistrate's Orders. One was transferred to Part III accommodation. The other, who was chronically sick, was subsequently transferred to hospital.

The elderly woman removed by Magistrate's Order to Part III Accommodation in 1954 is still accommodated.

Burial of the Dead

During the year four burials were carried out in cases where no other arrangements could be made. The costs of three have been recovered. Regarding the fourth, part of the cost has now been recovered and it is anticipated that the balance will be recovered shortly.

Protection of Property

It is the duty of the Welfare Committee to ensure the safety of moveable property of persons when they enter homes or hospitals if no suitable arrangements are being made. This entails notifying the Police that the house is empty, checking that doors and windows are secure and possibly taking into protection valuables, cash or furniture.

All items except cash are stored at 42/44, Church Street, small items of value being kept in a safe. Cash is handed to the Borough Treasurer who places it in Suspense Account.

Occasionally advice is given to the relatives of mental patients on the procedure to be adopted when applying for appointment as Receiver of the Patient's Estate.

The Court of Protection and the Official Solicitor are notified of cases which may be their concern. Both these bodies are given any assistance they require in dealing with these cases.

Recovery of Expenses from Persons liable to maintain Dependants

It has not been necessary to apply to the Petty Sessional Court for any recovery of expenses during the year.

Entertainments and Outings

This summer it was decided to give the old people an afternoon coach outing with a meal at tea-time instead of setting out in the morning and having lunch out as in previous years.

The Outing was in the form of a tour of the beauty spots of Wirral with a stop at Parkgate to enjoy the fresh air and purchase ice cream, etc. There followed a very enjoyable meal at Little Sutton from whence the party set off back to Wallasey after an extremely pleasant day out in the sunshine of the year's truly memorable summer.

As usual at Christmas time the Old People joined in the festive spirit and the Hostels were 'decked' out with Christmas Trees, decorations, and all the cheerful things which would make Christmas a happy occasion for the old people.

Gifts of fruit, flowers, sweets, reading matter, clothing and other articles to brighten up the lives of the residents were gratefully accepted from Schools, Churches, etc., and individuals, particularly at Christmas and Harvest Festival.

Community Welfare

Once more attention must be drawn to the plight of old people with no relatives to help or care for them. It is by drawing attention repeatedly to this problem that perhaps realisation of the situation can be brought home to people who perhaps do not realise the extent and seriousness of it.

There are many old people who, due to lack of hostel accommodation, are managing somehow to carry on themselves. There are also those who prefer to manage themselves anyway, preferring the independence of their own homes. Both these types of old persons would probably appreciate some sort of outside assistance such as regular visits, shopping, and help with domestic work. Excellent work as usual was done throughout the year by the Wallasey Voluntary Old People's Welfare Committee and the Women's Voluntary Service, but it is likely that relatives and individuals could also give assistance in this manner.

Mention must again be made of the excellent work carried out by the W.V.S. Meals-on-Wheels Service. It continues to give hot meals throughout the Borough to those in need. The meal charges are reasonable and are subsidised by the Corporation so should not cause any hardship to the recipients.

Regarding the demand for hostel accommodation the fact that the Waiting List was larger at the end than at the beginning of the year proves that at present the situation, far from improving, is becoming even worse. This state of affairs is natural as the proportion of old people is steadily increasing. This fact must be recognised by all Local Authorities and steps taken to meet the situation.

BLIND WELFARE

Registration of Blind Persons

During the twelve months ending 31st December, 1959, 53 people were examined by Mr. W. Dunlop Hamilton, 1 by Mr. Phillips and 1 through the Referee Service of the North Regional Association for the Blind ; of these 32 were found to be blind.

Of the remaining 23, 14 were placed on the Observation Register for Partially Sighted, and 9 re-examined.

Of the 32 certified blind, blindness occurred in the following age groups :—

16—20 years	...	...	...	...	...	...	...	...	...	...	1
21—29	„	...	...	...	...	...	...	...	...	...	1
50—59	„	...	...	...	...	...	...	...	...	...	1
60—64	„	...	...	...	...	...	...	...	...	...	3
65—69	„	...	...	...	...	...	...	...	...	...	1
70—79	„	...	...	...	...	...	...	...	...	...	12
80—84	„	...	...	...	...	...	...	...	...	...	4
85—89	„	...	...	...	...	...	...	...	...	...	8
90 and over	.	...	...	...	...	...	...	...	...	...	1

Statement re : Incidence of Blindness in Registered New Cases

	Cause of Disability		
	<i>Glaucoma</i>	<i>Cataract</i>	<i>Others</i>
(i) Number of cases registered during the year for whom the following is recommended :—			
(a) No treatment	2	2	12
(b) Treatment (Medical, Surgical, Optical)	4	3	9
(ii) Number of cases registered during the year at (a) and (b) above, which on follow-up action have received treatment	3	3	9
	<i>Ophthalmia Neonatorum</i>		
(i) Total number of cases notified during the year		Nil	
(ii) Number of cases in which :—			
(a) Vision lost		Nil	
(b) Vision impaired		Nil	
(c) Treatment continuing at end of year		Nil	
	<i>M.</i>	<i>F.</i>	<i>Total</i>
No. on Register at 1st January, 1959	105	140	245
No. added during year :—			
New Cases	14	18	32
Transfers from other Towns ...	2	6	8
	<hr/>	<hr/>	<hr/>
	121	164	285
	<hr/>	<hr/>	<hr/>
Less No. of Removals from Register owing to :—			
Leaving Wallasey	2	9	11
Deaths	11	11	22
	<hr/>	<hr/>	<hr/>
	13	20	33
	<hr/>	<hr/>	<hr/>
	108	144	252
	<hr/>	<hr/>	<hr/>

From 1st January, to 31st December, 1959, two certificated Home Teachers were employed.

During the year 3,628 visits were made to Blind Persons. In addition to these visits, the Home Teachers attended 14 Social Functions given by organisations on behalf of the blind.

69 classes teaching Occupational Therapy were held during the year. Evening and afternoon classes are held in the Wallasey Spastic Centre and a keen interest is shown by all who attend.

The following crafts are taught :—

Seagrass seating ; Somtwine seating ; String bag making ; Rug making ; Basketry ; Bath Mats ; Knitting ; Raffia work and Weaving.

At the Fete and Gala held at Central Park, Wallasey, in July 1959, approximately £33 0s. 0d. worth of articles made by the blind were sold.

The Home Teachers have also taught Handicrafts, Braille, and Moon, to blind people in their homes.

Ten blind people accompanied by one Home Teacher, went to Manchester in May, 1959, to take part in the Annual Braille Reading Competition organised by the National Library for the Blind. Two of the ten were successful in winning prizes in the class for readers who have learnt Braille during the past five years.

One of the competitors has also been successful in the Braille Writing Test arranged by The Royal National Institute for the Blind, London, and awarded a Proficiency Certificate.

Holidays have been arranged for a number of blind people to spend a week or fortnight in Holiday Homes for the Blind at Southport, Harrogate, Blackpool, New Brighton, and Bridgnorth.

Training and Employment

A boy aged 16 years left Condover Hall residential school for blind children with other handicaps, and was transferred to the Mental Deficiency Institution at Southport.

A young man aged 18 years Partially Sighted was re-examined through the auspices of the Referee Service, North Regional Association for the Blind, Leeds, and was transferred to the Register for the Blind. A course of Industrial Rehabilitation was arranged for him, and on his return, employment was obtained at an Engineering Works, but unfortunately the young man left of his own accord after one week's employment. This is the second occasion where employment has been found and he has left. At present he is unemployed.

A man who trained at the Royal National Institute for the Blind, Training College, London, to become a Dictaphone Typist, has been unsuccessful in obtaining employment. He has also studied Shorthand at the local Evening School in the hope of obtaining employment as a Shorthand Typist, but despite great efforts he is still unemployed. An application has been made for a Refresher Course at the Training College, London, and the man intends to reside in London permanently where the prospects of employment are much brighter.

A young man aged 21 years, who hopes to become a Solicitor, is making excellent progress with the private tuition he is receiving through the auspices of the local Education Committee. In June, 1960, he is taking the necessary examinations for gaining admittance to the Liverpool University where he has been accepted.

Welfare Services for the Partially Sighted

National Assistance Act, 1948

There are 52 persons on the Observation Register for the Partially Sighted. During the year 95 visits were made to Partially Sighted Persons.

People on this Register are permitted to attend Handicraft Classes and Social Functions held for the Blind.

Talking Book Machines

Four Talking Book Machines are distributed to blind people in their homes for three monthly periods, and this service is greatly appreciated by all who participate.

Wireless Sets

The British Wireless for the Blind generously allocated 9 new V.H.F. Bush models, 3 Bush D.A.C. 10 Mains sets, and 1 Ever Ready Battery Set to the Blind in Wallasey.

Free Travel Vouchers

Through the courtesy of the Wallasey Motor Bus and Ferries Committees, Registered blind persons still continue to receive travel vouchers enabling them to travel free on the Buses and Ferries.

During the year 1959, the Crosville Motor Bus Company have kindly sent 18 bus passes at reduced fare for Wallasey blind persons.

The North Wales Steamship Company allowed the blind persons to travel on the Llandudno boats at a reduced rate. All these facilities are greatly appreciated.

Voluntary Organisations

A number of blind persons have benefited by the Meals-on-Wheels Service organised by the Women's Voluntary Service.

The Women's Voluntary Service have also acted as escorts to the blind people.

The Voluntary Blind Welfare Committee hold weekly socials and organise an annual outing and a Christmas Party for all the blind in Wallasey, the cost being subsidised by the Local Authority.

Thanks are due to all those Voluntary Agencies who have given their services to the blind in Wallasey, i.e. Social Functions, Theatre Tickets, and gifts in the past twelve months, also to members of the Rotary Club who have conveyed many people to and from these functions.

WELFARE OF HANDICAPPED PERSONS

(Other than Blind and Partially Sighted)

During the year 1959 one Welfare Visitor was employed and 73 new cases have been added to the Register of Handicapped Persons. It is not enough to register patients and then forget their existence — the follow-up and individual help is more important. 887 domiciliary visits were made in the year, 28 escorts and visits to patients in hospitals, 74 to social clubs and functions, and in addition, 28 Committee Meetings were attended. Homebound persons are specially visited for the purpose of shopping, collection of pensions, and helping generally. Close contact is kept where necessary with the Women's Voluntary Service, and various sections of the Health Department such as Home Help Service and Home Nursing Service.

The Scheme for the Welfare of Handicapped Persons has developed in the last year and become a recognised and useful contribution to the Welfare Services in the Borough.

Personal and domestic aids have been supplied to individual cases to enable them to become independent, and the requests for financial help over structural alterations both in private and Corporation properties continue at a steady rate.

When invalid tricycles are supplied by the Ministry of Health, the Welfare Committee meet the cost of necessary alterations such as concrete paths, ramps, etc. Removable wooden ramps and hand rails have been installed for the benefit of handicapped persons. Transport to employment is essential for many disabled as they are not able to use public transport, and without their tricycles they are immobile and therefore almost housebound.

A notable addition to the scheme this year has been the inauguration of Handicraft classes for the disabled. In May a qualified Handicraft Teacher was engaged, and in June a weekly class commenced at Penkett Road, Wallasey. For the convenience of people living at the other end of the Borough, a Moreton class was organised and commenced in November, taking place weekly at Oakenholt Road. Basketry, making of lamp shades and sea-grass stools, flower making, tapestry work, etc., are taught to men and women of all ages from 16 to 70 years of age. 339 domiciliary visits have been made since May teaching all types of diversionary homework. The favourable influence of gainful occupation for this type of more severely handicapped persons is so obvious that its merits need not be stressed here.

The Ambulance Service has been called upon to convey the badly disabled to the classes.

Permanent residence has been provided at the following Homes :

Turner Memorial Home of Rest, Liverpool	6 men
Maghull Homes for Epileptics, Lancs.	4 men
	2 women
David Lewis Epileptic Colony, Ches.	3 women
Charles Best House for Elderly Diabetics	1 woman

Financial responsibility has been accepted in each case by the Welfare Committee.

Difficulty is still experienced in obtaining suitable residential accommodation for the younger disabled where they are unemployable and have no relatives to undertake their care.

Rehabilitation, Training, and Employment

Courses of Industrial Rehabilitation are provided by the Ministry of Labour and National Service at 15 Industrial Rehabilitation Units situated in various parts of the Country. Their aim is to restore a maximum degree of fitness for employment of persons who, because of sickness, accident or long unemployment, need a chance to regain confidence in their ability to get and keep a job. These Courses result in a large proportion being placed in open industry as well as sheltered employment.

The Wallasey Remploy Factory employs 60 severely disabled men and women in the manufacture of industrial gloves.

The Anne Glassey Workshop received a financial grant from the Welfare Committee in 1959. They provide permanent employment for six tubercular patients.

The Sir Robert Jones Workshop, Liverpool, employs one Wallasey male epileptic as a poster compositor, his wages being subsidised by the Wallasey Welfare Committee.

At the 31st December, 1959, there were six persons classified as unlikely to obtain employment other than under sheltered conditions. This figure exclude men and women who are still in receipt of Sickness Benefit.

Voluntary Organisations for the Handicapped

The Meals-on-Wheels Service organised by the Women's Voluntary Service is beneficial to many handicapped homebound persons and their Clothing Service is frequently called upon when necessary.

The Wallasey Hard of Hearing Club is in its tenth year and meets every Thursday evening at Hale Road, at premises provided by the Local Authority. Lip reading classes are held but their aims are mainly social. A course of handicraft classes has been given by the Welfare Department's handicrafts teacher.

The Liverpool Adult Deaf and Dumb Benevolent Society and the Catholic Deaf Society of St. Vincent de Paul received an increased *per capita* grant in respect of 65 Wallasey deaf residents. The social centre at Princes Way, Liverpool, is available to all Merseyside deaf people, and a new centre at Ashville Road, Birkenhead, is to be opened in the new year, Wallasey residents being invited to attend.

The Wallasey Spastic Association hold three handicraft classes a week for young and adult Spastics, the cost of their tuition being subsidised by the Local Authority Education Committee. Parties and Outings are organised during the year.

The Welfare Department assists and co-operates with the Wirral Invalid Tricycle Association in providing weekly social meetings (the rent of the premises at Penkett Road being met by the Welfare Committee). During 1959 a Christmas Dinner and Entertainment, motor coach outings and tricycle runs were successfully organised. The membership numbers approximately 100 disabled people.

The Welfare Section is represented on the following Committees :

- The Liverpool Adult Deaf and Dumb Society
- The Catholic Deaf Society of St. Vincent de Paul
- The Liverpool Council of Social Service
- The Wallasey Disablement Advisory Committee
(Ministry of Labour)
- The Wallasey Spastic Association
- The Wirral Invalid Tricycle Association.

Statistics of Registration*Register of Handicapped Persons: —*

		Under 16 yrs.	16—64 yrs.	65 years and over
Deaf	M.	—	28	6
	F.	—	25	6
Hard of Hearing ...	M.	—	13	6
	F.	—	11	4
General Classes ...	M.	1	375	39
	F.	—	157	9
Total			680	

Observation Register : —

General Classes ...	M.	—	132	5
	F.	—	42	1
Total			180	

Grand Total 860

Included in the “General Classes” above are Spastics and Epileptics over school age, i.e. :—

		Employed	Unemployed	In Homes	Total
Spastics					
Males	3	—	1		
Females	2	6	1	13	
Epileptics					
Males	13	5	4		
Females	7	2	5	36	

COUNTY BOROUGH OF WALLASEY
EDUCATION COMMITTEE



Report

OF THE

Principal School Medical Officer
For the Year 1959

WINSTANLEY & WATKINS LTD.

1960

STAFF

Medical Officer of Health and Principal School Medical Officer :

Dr. H. W. HALL, M.B., Ch.B., D.P.H.

*Deputy Medical Officer of Health
and Deputy Principal School Medical Officer :*

Dr. W. F. CHRISTIAN, M.B., Ch.B., D.P.H.

Assistant Medical Officers of Health and School Medical Officers :

Dr. E. J. O'REILLY, M.B., Ch.B., B.A.O.

Dr. ESME I. GRANT, M.R.C.S., L.R.C.P.

Principal School Dental Officer :

Mr. C. J. LUYA, L.D.S.

School Dental Officers :

Mr. W. A. HENDERSON, L.D.S.

Mr. E. G. MASON, L.D.S.

Miss A. P. FARRELL, B.D.S. (Part-time)

Mr. L. F. BURROWS, L.D.S., R.C.S. (Eng.) (Part-time)

Dental Attendants :

Miss A. M. BARBER (Res. 31/1/59)

Mrs. E. M. BROWNE

Miss P. BERGIN

Miss J. ELLIS (App. 9/3/59)

Mrs. M. B. BOOTH (Part-time)

Mrs. U. BROWN (Part-time)

Superintendent Health Visitor/School Nurse :

Mrs. K. SCHOFIELD, S.R.N., S.C.M., H.V. Certificate

Health Visitors/School Nurses :

Miss E. A. TEGGINS, S.R.N., S.C.M., H.V. Certificate

Miss A. J. EDGE, S.R.N., S.C.M., H.V. Certificate

Miss C. E. MURRELL, S.R.N., S.C.M., H.V. Certificate

Mrs. E. E. P. NOLAN, S.R.N., S.C.M., H.V. Certificate

Mrs. W. DOVEY, S.R.N., S.C.M., H.V. Certificate

Miss M. E. ASPINALL, S.R.N., S.C.M., H.V. Certificate

Miss E. M. MORGAN, S.R.N., S.C.M., H.V. Certificate

Miss E. WHITBURN, S.R.N., S.C.M., H.V. Certificate

Miss K. E. HIGGINS, S.R.N., S.C.M. (Part 1), H.V. Certificate

Mrs. I. D. WINTERBURN (nee Bellis), S.R.N., S.C.M. (Part 1),
H.V. Certificate

Mrs. M. KEANE, S.R.N., S.C.M., H.V. Certificate

Miss P. M. REPTON, S.R.N., S.C.M. (Part 1), H.V. Certificate
(Res. 18/4/59)

Mrs. M. E. GALLIMORE, S.R.N., S.C.M. (Part-time)

Visiting Specialists :

Mr. J. D. ELLIOTT EDWARDS, M.B., Ch.B., D.O.M.S.

(Ophthalmic Specialist)

Mr. H. DAVIES, M.B., F.R.C.S. (Eng.), Ch.B.,

Ch.M., Ortho. (Orthopaedic Specialist)

Dr. G. EGAN, M.D., Ch.B., D.P.M. (Psychiatrist)

Physiotherapists :

Mr. K. JONES, M.C.S.P.

Miss U. BROWN, M.C.S.P. (Res. 31/10/59)

Speech Therapist :

Miss V. M. SMYTH, L.C.S.T.

Educational Psychologist :

Mr. J. McLEOD, B.Sc., Ed.B. (Res. 31/5/59)

Mr. J. MAGINN, B.A. (Hons.), Dip Education,
Dip. Ed. Psychology. (App. 4/8/59)*Social Worker :*

Mrs. U. BARRETT-LENNARD (Diploma in Social Science)

Administration Staff :

Mr. S. D. LAWSON

Mrs. M. FRANCE

Mrs. P. BEVERS

Mrs. B. H. MAUNDER (Part-time)

Town Hall,
Wallasey.
May, 1960.

To:—The Chairman and Members of the Education Committee:

Ladies and Gentlemen,

I have pleasure in submitting my Report on the School Health Service for the year 1959.

There are no fresh developments in the service to report this year, but it is satisfactory to be able to say that we have been able to maintain a reasonably well staffed dental service and also the following special clinics and services:— Ophthalmic; Orthopaedic; Child Guidance; Physiotherapy, including artificial sunlight, and speech therapy. The work of all these special services are reported on in detail in the body of the Report, together with the individual remarks of your School Medical Officers.

During 1959 Infective Hepatitis, a virus disease causing inflammation of the liver and jaundice, was quite prevalent, affecting in turn most of the schools in the Borough. The majority of cases were mild and the children made good recoveries, but it is with regret that I have to report that two cases were fatal, one a boy aged $6\frac{3}{4}$ and the other a girl aged 7.

There were no cases of diphtheria and only very few cases of measles and scarlet fever, all of which were mild. There were no cases of acute poliomyelitis and 6,896 school children received their primary course of vaccination against this disease during the year and, in addition, 7,267 who had previously received their primary course had a re-inforcing injection of the vaccine.

The foreword of this Report is written in the year 1960 which is Charter Jubilee Year of the Borough. The health and physique of the school children of Wallasey has undergone in the last fifty years a remarkable change for the better, and this can in no small measure be attributed to the efforts of your School Health Service.

Finally, I should like to thank the Director of Education and his staff for their co-operation and also the members of the Education Committee for their sympathetic consideration and interest in all matters affecting the School Health Service.

I am,

Your obedient Servant,

HOWARD W. HALL.
Principal School Medical Officer.

ANNUAL REPORT—SCHOOL HEALTH SERVICE, 1959

Dr. Christian, Deputy Principal School Medical Officer, makes the following observations:—

The periodic medical inspections have continued as in previous years. From the school year beginning September, 1959, the second periodic inspections were carried out during the first year in the secondary schools instead of during the last year in the primary schools. This change was brought into effect following preliminary discussions with the Director of Education and the Head Teachers of the schools involved and after approval by the Education Committee.

This, of course, meant that in the year of the changeover there were fewer children seen in the second age group, for those children who were examined during their last year in the junior schools in the academic year 1957-58 were not examined again in their first year in the senior schools in the academic year 1958-59.

From September, 1959, however, children are being examined in their first year in the senior schools, as these children were not previously examined during their last year in the junior schools.

Many authorities had to reduce the amount of time devoted to school medical inspections during the year on account of the intensive national poliomyelitis vaccination campaign. In Wallasey the reduced numbers to be examined in the second age group in 1959 enabled the local authority medical staff to devote additional time to innoculation sessions and so kept down the waiting lists for innoculation.

There are a number of advantages to be gained from conducting the second inspection during the first year of attendance at the senior schools.

1. The children's study is not broken into during the important year of the classification examinations.

2. The inspection takes place at the beginning of the pupil's school life in the senior schools and so enables defects and handicaps to be brought to the notice of the teaching staff at an early date. Adjustments and, if necessary, restrictions can then be introduced forthwith. Previously, when children were examined in their last year at the junior schools, the medical information thus obtained was frequently not passed on to the staff of the senior schools.

3. The medical officers examining the children are familiar with the requirements of the school the pupil now attends and this may influence the medical officer in recommending adjustments or restrictions. Previously children were examined in the junior schools at a time when it was not known to which senior schools they would transfer.

The three groups of children who are now examined are:—

1. Every pupil admitted for the first time to a maintained school as soon as possible after admission.
2. Every pupil attending a maintained secondary, grammar or technical school during the first year of attendance at such school.
3. Every pupil attending such a school during the last year of attendance at that school.

As will be seen from the report of the Superintendent Health Visitor, school children are not without supervision during their stay in the junior schools. In addition, any special cases of suspected defect or handicap can be referred to the school clinic to see the school medical officer there. Requests for such examinations come from Head Teachers, School Nurses, the Educational Psychologist, and Parents.

All children found to have significant defects at their first inspection after school entry, are followed up, sometimes by home visits by health visitors and in any case, by examination by the school medical officers when they subsequently visit the schools. The same applies to children found to have defects at the second medical inspection.

The number of periodic inspections carried out during the year was made up as follows:—

Entrants:	Leavers:	Others:
1,296	1,491	986

The number of special inspections which include special cases seen at school at the request of the teacher or health visitor and cases first seen by the school medical officers at the school clinics, was 1,561.

The number of reinspections carried out during the year was 450.

The General Condition of the pupils examined at routine medical inspections was as follows:—

	Number	Percentage
Satisfactory	3,766	99.8
Unsatisfactory	7	0.2

It is always more satisfactory to examine a child in the presence of its parent, but parents do not attend very frequently for the Leavers' Inspection. Usually the children to be examined actively discourage their parents from attending.

A list of the duties carried out by the medical staff of the school health service was given in last year's Annual Report.

The following comments relate to certain aspects of this work during 1959.

The two Day Special Schools were regularly visited during the year. Elleray Park Special School by Dr. O'Reilly and Clare

Mount Special School by myself. All children in attendance were examined at least once in the year and many were examined on several occasions. In addition, I make special examinations including assessments of intelligence of those children whose parents request that they should leave Clare Mount Special School before they are 16 years of age and of those children who, although staying on for the full period, appear to be in need of further supervision after leaving school.

The inoculation of thirteen year old children with B.C.G. vaccine to protect them against tuberculosis has continued during the year. As the vaccine is now very reliable, it is no longer necessary to retest all vaccinated children one year later to see if the vaccination was successful. Instead, only those children whose vaccinations appear on inspection to be extremely small, are retested and, if necessary, re-vaccinated. As these retests can be fitted in at the time of the next visit to the school, special visits to schools for the sole purposes of testing the efficacy of the vaccination are no longer being carried out. The consequent reduction in the number of school visits re B.C.G. vaccination will help to balance the increase in the number of visits paid to the senior schools to carry out medical inspections.

The problem of plantar warts or veruccae is still with us. During the year regular weekly sessions have been held at Merton Road Clinic to treat both warts and veruccae with carbon dioxide snow. In addition, affected children are treated with snow at the Moreton Clinic twice monthly. During the year the total number of children treated for warts was 239 and for veruccae 122.

During the year I visited the Wallasey swimming pools to see the condition of the changing cubicles and to ascertain the measures used to reduce the incidence of infection. All possible measures appear to be used to keep the changing cubicles and bath sides clean. Some of the cubicle standing boards at the New Brighton and Harrison Drive baths needed discarding as the wooden surfaces were no longer smooth. The changing cubicles at Guinea Gap Baths should be resurfaced where cracked and uneven.

There is also the possibility that infection is spread in schools via:—

- (a) infected plimsolls
- (b) the floors of showers and standing boards in those schools which have these facilities.

The skin is open to penetration by the wart viruses when the outer protective horny layer has either been broken by splinters of wood, nails sticking up through shoes, etc., or has become wet through contact with water or perspiration. The feet are therefore most vulnerable in the following circumstances when either of these conditions apply—

- (a) swimming baths—feet wet and surface horny layer broken by minor trauma.
- (b) gymnasia—
 - i. horny layer broken by small splinters of wood—

- where bare foot gymnastics and dancing are practised.
- ii. horny layer softened and macerated through taking physical exercise in plimsolls, the exercise causing sweat to accumulate on the feet and inside the plimsolls.
 - iii. horny layer becomes wet in showers taken after the exercise mentioned above.

In my opinion, infection is contracted most frequently from the swimming pools. "Pool" plimsolls though a source of infection are not, in my opinion, so often responsible. The relative importance of these factors should be revealed when the results of an enquiry now being made are known.

Measures to reduce the risk of spread of plantar warts should include:—

1. Early ascertainment through regular foot inspections.

Comment—The variety of work undertaken by the school health visitors has increased considerably over the last few years and, with the existing staff, it is not possible to carry out foot inspections as frequently as is desirable, say, once a term. This difficulty could be met by the appointment of a part-time chiropodist to carry out regular foot inspections in all junior and secondary schools and to carry out treatment at the clinics.

2. When visiting swimming pools or school showers children should use a clean towel of their own to stand on when changing. Alternatively, they should wear rubber shoes when in the cubicles.

3. Children should wear only their own plimsolls for physical activities in school.

4. If this is not always possible, the "pool" plimsolls kept in school should be wiped with a solution of formalin, after use by any child.

In view of the unreliability of the measures outlined in subparagraphs 2, 3 and 4, to prevent the spread of plantar warts, I feel that reliance should be placed on early ascertainment through regular foot inspections.

Before concluding, I should like to mention that a number of handicapped children are still receiving home teaching, as they are not well enough to stand up to the routine of even a special school. The number visited by me in their homes during 1959 was 7.

Finally, I would like to thank all Head Teachers and their staffs for their willing co-operation and assistance in ensuring that the school inspections run smoothly throughout the year.

The observations of Dr. O'Reilly, School Medical Officer, are given below:—

Once again the progress in the health of the school children of the Borough reflects the national picture. Children are bigger

and stronger and heavier than ever before. Some of them are too heavy—a sign of the times; the incessant consumption of sweets and the long sessions in an armchair in front of the television set.

On the other hand, there are still to be seen a few who suffer from nutritional anaemia and hypovitaminosis, despite the plethora of good food which surrounds them. These conditions are almost invariably due to peculiarities in eating habits. There are children who refuse to eat vegetables or meat, or fish or fruit. This type of mild maladjustment may be even more common than previously. In the past, scarcity or poverty accounted for most malnutrition. In the absence of these factors, a psychiatric cause must be postulated.

Another sign of maladjustment which seems to be more prevalent, is nocturnal enuresis. We certainly meet more cases, especially among older children. However, the increase may be more apparent than real. For as the standard of cleanliness rises, parents are more likely to complain and seek help.

In the matter of cleanliness and personal appearance, we have witnessed a revolution in recent years. Instead of slovenly and careless dress, we now see what is almost a craze for bodily adornment. This is especially true of the older girls. Of course, with them, it is really the manifestation of a fundamental instinct, and, as is to be expected, at this stage of their development, the newly awakened urges are not moderated by reason. They feel they must keep abreast of the ephemeral fashions in dress, even if this involves stiletto heels and skirts in which they cannot sit down in comfort. It is in cases like this that guidance is really needed, so that their own good taste may restrain their more outrageous impulses. In the older boys and the junior boys and girls, the greater attention to outward appearance is wholly admirable.

Bad eyesight seems to be more common than in previous years. Television is often blamed for this, though it is almost universally agreed among authorities in the matter that the cause is usually hereditary.

On the other hand, defective hearing is becoming more rare, like diseased tonsils and adenoids which ordinarily caused it. The general rise in the standard of hygiene must be responsible for the gradual disappearance of this scourge.

Dr. Grant, School Medical Officer, makes the following observations:—

There have been no radical changes in the School Health Service, with the exception of one, concerning the routine medical inspection of those in the second age group. These children are now examined soon after entering the secondary modern, technical or grammar schools, instead of before leaving their primary schools.

The main advantage of this change in procedure is that if a defect is found that requires the co-operation of the headteacher, we are able to discuss it with the staff, or leave instructions, know-

ing that more interest will be taken, because the pupil will be spending about four years there and not leaving in a few weeks' time.

A point that I would like to stress again in this year's report deals with the poor attendance of mothers at the medical inspections. At first this was only noticeable when leavers were being examined, but recently I have noticed that far fewer mothers than before attend the routine inspection of their eleven-year old children. This may be due to more mothers working, but I think it is more frequently due to the growing independence of the children who do not wish their mothers to be present and the rather weak acquiescence of the parent. This may possibly prove to be a factor against the examination of this age group at the secondary schools. I can only repeat that it is most important for mothers to be present at these routine medical inspections, of which there are only three, whatever the age of the pupil, and I hope the teaching staffs of the school will support our request, whenever possible.

Catarrh, coughs, colds, bronchitis, sinusitis, and all upper respiratory infections are the ever recurring evils of Merseyside—I wonder if the Clean Air Act, soon, I hope, to be implemented in various parts of the borough will eradicate these debilitating and very annoying diseases.

A contributory factor in these ailments is, I am sure, the ignorance of the importance of good breathing. At all medical inspections I have occasion to criticise the manner in which breathing is performed; rarely, does the request to breathe in and out produce any real expansion of the chest, with consequent inadequate aeration of the lungs and insufficient exhalation of the impure gases.

I think that all P.T. classes should include instruction in deep breathing and I have asked some of the head teachers whose schools I visit to pass on my remarks to the appropriate quarters.

I do not think we can always blame tonsils and adenoids for these chronic recurring upper respiratory infections, so prevalent in the winter. It is not nearly so common now to refer children for removal of these offending organs and even when they are removed, there is not always the hoped for improvement. No, I am convinced that cleaner, fresher air, better ventilation in class rooms, homes and cinemas, deeper breathing, prophylactic vitaminisation and general attention to health and hygiene are the more important preventive measures. We are constantly exhorted to eat clean food and drink clean water, so why not to breathe clean air, and breathe it deeply.

The subject of feet crops up like a hardy annual each year and this year is no exception. Although it is becoming common knowledge that "casuals" are thoroughly bad footwear and are responsible for flat feet, dropped transverse arches and hallux valgus, they are just as popular as ever and any criticism from me

at a medical inspection is just received with a sheepish grin by the girl and a rather weak "I told you so" by the mother to her daughter.

Praise must be given, however, to the headmistress of Maris Stella High School who positively refuses to allow the wearing of casuals in school and this policy, I may say, has already borne fruit and I noted, with satisfaction, that there were far fewer foot defects and deformities here than at other schools, where no such firm directive was issued.

The standard of cleanliness of both body and clothes is very good on the whole, and rarely these days does one have to exclude a pupil because of nits in the hair, but, at the risk of trespassing on the preserves of the School Dental Officer, I must say that I am not very pleased with oral and dental hygiene and I frequently reprimand both girls and boys on the neglected state of their teeth.

I still regret the Ministry's decision to limit the categories describing the general condition of the pupil to two groups—namely, "Satisfactory" and "Unsatisfactory," instead of, as previously, three groups A, B and C.

I think it gives a false sense of security and pride when we find that 99% of all the children examined in 1958 were "Satisfactory" and only 1% were "Unsatisfactory"—yet one hesitates to describe a child as "Unsatisfactory" unless one has very good reason for doing so.

One hears constantly that the average weight and height of school children has increased, but there is still a very wide range and one meets those that are considerably overweight and too fat, and those that are underweight and too thin.

Minor Ailment clinics are still well attended and good results are obtained in the treatment of septic fingers, abrasions, burns, discharging ears and inflamed eyes.

Many mothers are still pleased to bring their children to us when they are suffering from loss of appetite, listlessness, loss of weight and general debility, or from that distressing condition, bed-wetting, and we are able to help with advice, tonics and other treatment, such as artificial sunlight and remedial exercises.

A lot of our time, too, is taken up with medical examination of those pupils who are going to Teachers' Training Colleges, for which a very high standard of health is demanded.

Fewer contagious skin diseases are encountered these days, probably due to a higher standard of cleanliness, better nutrition and modern therapy. The one that remains to annoy and distress the adolescent boy and girl is acne, and this unsightly complaint is most resistant to treatment, though it responds to a certain degree to exposure to ultra-violet light.

I should like to take this opportunity of thanking the head teachers for their hospitality and co-operation. The accommoda-

tion I am now offered is usually the best available, and it certainly makes our work easier and more pleasant, if we feel that we are receiving consideration and being welcomed as a friend rather than a foe.

Mr. Horace Davies, Orthopaedic Surgeon, makes the following observations:—

The orthopaedic clinics have followed their usual preventative and remedial pattern during 1959. The numbers attending the weekly clinic at Merton Road and the monthly session at Moreton seem fairly constant, showing the continued need for orthopaedic centres for children.

The care and attention which I have advocated over the years to the use of constant foot exercise in the physical training classes in the schools seem to be reaping their reward, as I have found the incidence of flat foot to be considerably lessened.

Knock knees however, are very much on the increase and are of considerable severity. I have found they are not responding to the usual simple heel correction but have necessitated splintage. At the moment the causes of this increase remain somewhat obscure but overweight in the early walking years is one of the causes.

During this year we have also found a slight increase in congenital conditions but the numbers of children with cerebral palsy remain steady. The excellent treatment these children obtain in the spastic unit is very apparent in their continued progress.

One disturbing feature in this year's report is the continual failure of parents to bring their children for physiotherapy. There has been a noticeable apathy on the part of parents in keeping appointments with their children and it presents the physiotherapy staff with many difficult organising problems when parents have not the courtesy to keep these appointments. I consider that we should establish some propaganda among the parents to emphasise the fact that physiotherapy treatment can only be effective if it is regular and that intermittent attendances are worse than useless.

I wish to thank all the staff who work with me at these clinics for their ever cheerful and loyal co-operation and help.

PHYSIOTHERAPY REPORT, 1959

Total Cases on Register:	2,854
Total Attendances:	10,138
New Cases on Register:	454
Orthopaedic Cases of School Age discharged: ...	119
New Orthopaedic Cases of School Age:	174

Artificial Sunlight Report

New Cases:	133
No. of Cases on Register:	333
Discharged (Cured):	14
Discharged (Improved):	15
Discharged (No Change):	1
Left School:	1
Defaulters (and removed from Register):	61
No. of Orthopaedic cases of school age treated:	1,345
No. of Orthopaedic Abnormalities treated at School:	23

The following observations are submitted by Mr. K. Jones, Physiotherapist:—

The fall in the number of remedial exercises in November and December is due to the fact that there was only one Physiotherapist and it was necessary to reduce the number of Group Treatments for that period.

The large number of defaulters amongst patients receiving U.V.R. was presumably due to parents considering that in view of the excellent summer enjoyed, continuation of treatment was not necessary.

Remedial exercises continues to be given for postural defects referred by the Orthopaedic Surgeon and the School Medical Officers.

Bad posture responds well to training — Pes Valgus and Pes Planus not always so, and one feels that one must accept the fact that there is an intractible “Flat Foot” whose shape and position will not be materially affected by exercises, however prolonged.

Cerebral Palsy.

It is an unfortunate fact that much education is still necessary to inculcate an enlightened approach to this serious problem. The practice (distressingly widespread), of classifying a C.P. child as mentally deficient on superficial acquaintance is to be deplored. Facial expression and ability to talk are no criteria on their own on which to base judgment of a C.P. child's intellectual capacity, and one would hesitate to be dogmatic on less than twelve months knowledge of a particular patient. As much distress can be caused by a premature diagnosis of gross intellectual impairment as in failing to help a parent to accept the fact that his child might well be mentally deficient. It is estimated that of all C.P. children the following figures obtain:

Normal Intelligence:	20%
E. S. N.:	40%
Mentally Deficient:	40%

Treatment should be started as soon as diagnosis is possible. Unfortunately in many cases treatment is postponed until the patient is 3 - 4 years old, with resultant lack of development of baby patterns, which then have to be facilitated, and faulty patterns eradicated. Active co-operation is not necessary in the early stages of treatment, as therapy consists of stimulation and facilitation of reflexes. Ideally a patient should commence treatment at 6 - 12 months, with an open diagnosis of Cerebral Palsy, as the type of lesion is often not ascertainable for several years, particularly in cases of athetosis. It is our practice to warn (I use the word advisedly) the parents that a long term view of treatment (15 years — i.e. until the child leaves school), must be taken.

Dr. G. Egan, Consultant Psychiatrist, makes the following observations on the work of the Child Guidance Clinic.

The statistics for the current year's work show that we have maintained a fairly constant pattern at the Clinic over the past three years. The average annual referral rate of 60 new cases is remarkably low for a borough with a school population of 16,250. This rates maladjustment in this Borough at approximately .4%, while the Underwood Report talks of figures ranging from 5 to 11%. Our low figures may indicate that Wallasey Borough can congratulate itself on having a remarkably stable school population, or it may on the other hand mean that there is a good deal of concealed maladjustment which does not come to our notice at this Clinic. Each year, the largest proportion of cases referred to us come from the Head Teachers, with the School Health Service as the next highest source. Probation Officers, Children's Officers, and Family Doctors make very little use of our service.

Delinquency as a cause of referral has dropped by 50% in the current year, i.e., from 18 cases last year to 9 cases this year. This may be no more than a freak occurrence, or it may herald the dawn of a better race with a better social conscience in the Borough of Wallasey.

Dr. J. D. Elliott Edwards, Ophthalmologist, submits the following observations:—

A new innovation during the year has been that the General Practitioner now has a letter sent to him when patients attend the clinics for the first time; he is then able to reinforce if necessary the advice given at the clinic.

Amblyopia with and without strabismus is a constant problem and requires the full co-operation of Ophthalmic Specialist, Orthoptist, General Practitioner, Health Visitor, School Teacher, and of course, parents and child, for its successful treatment. "Prevention is better than cure". Children with amblyopic eyes who are discovered before school age usually respond much better than those who escape notice until the binocular reflexes have had time to develop in an abnormal manner.

PHYSIOTHERAPY REPORT, 1959

	Visiting Orthopaedic Surgeon's Clinic			Artificial Sunlight Clinic		Breathing Exs. for post-operative Tonsillectomy and Adenoidectomy		Asthmas		Remedial Exercises		Miscellaneous
	New Pts.	Total Atts.	Disch.	New	No.Trts.	New	No. Trts.	New	No.Trts.	New	No.Trts.	
January ..	22	43	7	7	468	9	41	—	50	14	339	29
February ..	10	61	6	14	439	10	52	—	52	5	391	20
March ..	34	81	9	9	506	11	62	—	63	18	417	20
April ..	13	88	8	16	613	11	49	—	78	10	371	19
May.. ..	43	105	12	10	486	9	54	1	76	19	408	20
June.. ..	44	69	14	8	544	8	48	2	62	13	437	16
July	35	87	14	—	268	8	33	—	69	9	382	24
August ..	4	19	—	—	—	—	—	—	—	—	—	—
September ..	11	91	16	29	308	6	17	2	60	10	340	29
October ..	18	77	8	12	422	9	39	—	71	8	366	32
November ..	28	43	9	16	426	9	50	1	88	16	243	29
December ..	21	107	15	12	260	6	45	—	72	13	205	30
TOTALS..	283	871	118	133	4,740	96	490	6	741	135	3,899	268

REPORT of Mr. HORACE DAVIES, Orthopaedic Surgeon

Number of Sessions held at the Authority's Clinics	..	43
Number of New Cases	.. ..	313
Number of Re-examinations	.. ..	610
Number of Cases discharged cured	.. ..	148

Disease Categories	New Cases				Re-examinations				Discharged				
	Pre-Sch Age		School Age		Pre-Sch Age		School Age		Cured	Relieved	Left	Treatment Refused	Died
	M.	F.	M.	F.	M.	F.	M.	F.					
Trunk	—	—	1	1	—	—	3	3	—	—	—	—	—
Upper Limb.. ..	—	1	—	—	—	2	—	—	—	—	—	—	—
Lower Limb.. ..	3	3	—	1	2	2	5	2	1	—	—	—	—
Flat Foot	16	12	56	50	8	2	139	147	69	—	1	—	—
Hallux Valgus	—	—	3	4	2	—	2	14	1	—	—	—	—
Postural Kyphosis and Scoliosis	—	8	9	4	1	—	8	7	2	—	—	—	—
Knock Knee.. ..	38	—	14	10	50	36	26	18	35	—	—	—	—
Bow Leg	2	5	—	—	2	6	—	1	—	—	—	—	—
Other Conditions	4	2	18	15	8	6	28	25	23	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Conditions	—	—	—	—	—	—	—	—	—	—	—	—	—
Spastic Paralysis	3	1	1	3	4	1	11	9	—	—	—	—	—
Infantile Paralysis	—	—	—	—	—	—	—	5	—	—	—	—	—
Peripheral	—	—	—	—	—	—	—	—	—	—	—	—	—
Nerve Lesions	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Conditions	—	—	—	—	—	—	2	2	—	—	—	—	—
Osteomyelitis T.B.	—	—	—	1	—	—	—	—	—	—	—	—	—
Other Conditions	—	—	—	—	—	—	—	—	—	—	—	—	—
T.B.	—	—	—	—	—	—	—	1	—	—	—	—	—
Non-T.B.	—	—	2	—	—	—	2	2	3	—	—	—	—
T.B.	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-T.B.	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	5	1	—	—	4	2	3	—	—	—	—
	—	—	1	1	—	—	—	1	—	—	—	—	—
	—	—	7	4	—	—	5	4	7	—	—	—	—
	1	—	2	2	—	—	—	—	3	—	—	—	—

Educational Psychologist's Report on the work of the Schools' Psychological Service, 1959

This year has seen the departure of Mr. McLeod, who has been appointed Lecturer in the University of Brisbane, and his replacement as Educational Psychologist by Mr. Maginn from the University of Birmingham. The change was effected smoothly, and the continuity of the activities of the Educational and Child Guidance Clinics has been maintained.

During the year, the number of new cases referred to the Child Guidance Clinic was 57, as compared with 62 cases during 1958, and 61 during 1957. Apart from minor variations in the amounts of time spent on these cases by the members of the Child Guidance team, the overall pattern of work is similar to that of 1958.

An analysis of the work of the Clinic is made below:—

Cases referred

Current cases, January 1st, 1959	29
To be reviewed	1
New Cases, 1959	57
	—
	87
	—

The new cases were referred from the following sources, through either the Director of Education or the Medical Officer of Health:

Head Teachers	26
Deputy and Assistant M.O.H.	15
Parent	5
Probation Officer	1
Family Doctor	4
Children's Officer	6
	—
	57
	—

The disposal of cases dealt with during the year falls under the following headings:

Cases closed:	54
Improved	35
Advice only	8
Report only	2
Clare Mount	1
Epileptic School	1
Approved School	1
Occupational Centre	1
Left District	1
Failed to co-operate	3
Failed to respond to treatment	1
To be reviewed	4
Current cases	29
	<hr/>
	87
	<hr/>

The diagnosis of cases referred during 1959 are classified below:

Behaviour (aggression, sex, etc.)	15
Delinquent tendencies	9
Emotional immaturity	3
Emotional instability	2
Habit disorders	6
Tension habits	2
Truancy and non-attendance	8
Obsessional symptoms	1
Anxiety state	3
Subnormal	3
Psychosis	3
(Report only)	2
	<hr/>
	57
	<hr/>

The work of the psychiatrist, psychologist and social worker is set out in the following tables:

Psychiatrist:

Diagnostic interviews	57
Treatment interviews	247
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	304
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Psychologist:

Test interviews	60
Parent interviews	28
Treatment interviews	31
School reports	111
	<hr/>
	230
	<hr/>

Social Worker:

	<i>School Welfare</i>	<i>Clinic</i>
	<i>Cases</i>	<i>Cases</i>
Home visits	161 ...	708
Clinic interviews	12 ...	404
School inquiries	73 ...	348
Consultation with other agencies	111 ...	725
	<hr/>	<hr/>
	357	2185
	<hr/>	<hr/>

In addition to these activities in connection with families of both current and closed Child Guidance cases and the Welfare work, the Social Worker, Mrs. Barrett-Lennard, has given time to other aspects of social relationships. These include Merseyside Marriage Guidance Council meetings, talks to Young Wives' Groups, and attendance at professional meetings.

The work of the Educational Clinic has continued as usual, and the psychologist has been concerned with educational advice, individual remedial teaching, and classification for secondary schools. Remedial groups have been taken, as in previous years, by Miss Pilkington, both at the Clinic, and at Barnston Lane Junior School with the kind co-operation of the Head Teacher, Mr. Macklin.

Observations of Miss Smyth, Speech Therapist:—

The preponderance of children admitted for Speech Therapy with Multiple Dyslalia would appear to take precedence over stammerers. In fact, this is not so. During the week almost three quarters of the patients attending are stammerers, either on weekly treatment or supervision. The explanation is that although a high percentage of admittances each year, are diagnosed as Multiple Dyslalics, many require only the minimum of treatment, sometimes merely advice; whereas the child who stammers, usually needs treatment over a far longer period.

The Speech Therapy Clinic has a new and welcome addition in the Tape Recorder. It has proved a boon in the treatment of all speech disorders.

More home visiting has been achieved this year. It is difficult to form a true picture of the maladjusted or retarded child during visits to clinic and the cause of the defect often lies in the home.

The population of Leasowe and Moreton is continually increasing and one weekly session to cover this now large area, would seem most inadequate. Unfortunately no other alternative offers itself. The introduction of a second Speech Therapist to cover Moreton, Leasowe, and certain other clinics, seems the only solution. Of those on the Waiting List, 58, are Moreton and Leasowe children. During the weekly session 10 children have regular appointments, 4 of which are stammerers receiving group treatment.

Total number of attendances	1,900
Number of patients who have received regular treatment during the year	108
Number of patients who have received treatment at intervals during the year	120
Number of patients admitted	59
Number of patients discharged	69

Classification of Patients Admitted:

Simple Dyslalia	2
Multiple Dyslalia	29
General Dyslalia	1
Stammer	15
Stammer and Dyslalia	3
Dysarthria	2
Interdental Sigmatisms	4
Lateral Sigmatisms	1
Hyperrhinophonia	1
Rhotacism	1
	<hr/>
	59
	<hr/>

Classification of Patients Discharged:

Cured	50
Unco-operative	5
Left School	6
Left District	5
Attending schools out of the district	3
	<hr/>
	69
	<hr/>

Classification of the Waiting List:

Not yet interviewed	38
Interviewed and Placed on Supervision	29
Interviewed and awaiting a regular appointment	36
	<hr/>
	103
	<hr/>

**MEDICAL EXAMINATION OF TEACHERS OR INTENDING
TEACHERS.**—Min. of Education Circ. 249 of 1952

Total Number Examined

Teachers		Intending Teachers	
Male	6	Male	12
Female	5	Female	33
<hr/>		<hr/>	
Total	11	Total	45
<hr/>		<hr/>	

IMMUNISATION

Diphtheria

Schoolchildren given: Primary Immunisation	61
Reinforcing injections	421
<hr/>	
Total	482
<hr/>	

Poliomyelitis

Age Range: Born between 1944-1954—	
Received Primary Immunisation	6,478
Received Reinforcing Injections	7,107
<hr/>	
Total	13,585
<hr/>	

Tuberculosis

Schoolchildren tested for suitability for vaccination (Mantoux test)	1,168
Schoolchildren Mantoux positive and <i>not</i> vaccinated	100
Schoolchildren Mantoux negative and suitable for vaccination	1,064
Schoolchildren vaccinated with B.C.G. vaccine ...	1,061

**EXAMINATIONS OF CHILDREN FOR EMPLOYMENT,
ENTERTAINMENT, HOLIDAYS ABROAD, ETC.**

Employment	250
Entertainment	5
Holidays Abroad, etc.	60
<hr/>	
	315
<hr/>	

Mrs. K. Schofield, Superintendent Health Visitor/School Nurse, submits the following observations:—

The School Health Visitors have maintained the satisfactory standard of cleanliness amongst the children, which existed last year, despite extra duties and shortage of staff. The number of individual children with hair infestation during 1959 was 535; last year there were 544 in this category.

During the Health Surveys, the School Health Visitors continue to watch for signs of ill health, physical defects or behaviour problems. Any child needing medical attention is referred to the family doctor or to a School Medical Officer, after an interview with the parent.

A recent circular to Local Authorities (England) from the Ministries of Health and Education, states:—

“ that the Health Visitor should, as far as possible, be relieved of duties in the School Health Service, which do not call for the use of her special skills, so that she should be able to concentrate on giving health education and advice.”

Several members of the health visiting staff will welcome the time when we are invited into the Girls' Secondary School to give health education on such subjects as personal hygiene and mothercraft—very important subjects indeed when one considers the early age of maturity in teenagers and the marriages now taking place amongst the under 21's.

SUMMARY OF THE WORK CARRIED OUT BY THE SCHOOL HEALTH VISITORS DURING THE YEAR 1959

Health Surveys and Infestation with Vermin.

Health Surveys	95
No. of Clinic Sessions re Cleansing	44
No. of Examinations	24,838
No. of individual children found unclean	535

Home Visits

Cleanliness	223
Medical Treatment	505
Hospital References	48
Miscellaneous	243
B.C.G.	6
Ineffective visits, i.e. No Access	87

Other

Visits to Nursery Class	12
Special Visits to Schools	240
Visits to Special Schools	9
Sessions for Medical Inspections	265
Sessions at Minor Ailment Clinics	563
Sessions at Ophthalmic Clinics	95
Sessions at Vision Testing of 8 year old pupils	45
Sessions on Weighing and Measuring	
(Medical Inspection)	61
Sessions spent on Surveys	294
TOTAL VISITS	1,303
TOTAL SESSIONS	1,415

ELLERAY PARK OPEN-AIR SCHOOL

During the year 16 children were admitted, the classification of their defects or diseases being as follows:—

Chronic Bronchitis	2
Fibrocystic Disease of Pancreas	1
Nervous Debility	1
Epilepsy	1
Bronchial Asthma	3
Osteochondritis	1
Paralysis after Poliomyelitis	1
Old T.B.	1
Hydrocephalus	1
General Debility	1
R. Lung (collapse)	1
Encephalitis	1
Cerebral Palsy	1
	—
	16
	—

During the year 10 pupils were found suitable for transfer to ordinary schools, one left at 16 years of age, and one was transferred to a Secondary Grammar School. The number on roll on 31st December, 1959, was 98.

Observations of Mr. C. J. Luya, Principal School Dental Officer:—

I beg to place before your Committee the fortieth Annual Report of the School Dental Service of this borough, a service which was started in December, 1919, in a building in Church Street.

The professional staff during most of 1959 consisted of three long service full-time dental officers and two part-time officers in place of a full-time officer who resigned some years ago and whom it has been found impossible to replace. As one of these part-time officers resigned at the end of the year, a few remarks regarding the difficulty of obtaining full-time dental officers may be of interest.

The shortage of dentists is nation-wide and the difficulties of getting either full-time or part-time staff are not peculiar to Wallasey. In 1919 most dentists were engaged in private practice. There were few alternatives for the young dentist until the new and expanding School Dental Services offered a reasonable and interesting career. Now with many posts available in the Hospital Service under the National Health Service, a multiplicity of teaching posts in the University Dental Schools, and excellent opportunities as consultants in private practice and, of course, practice under the National Health Service, the School Dental Service has become something of a Cinderella. Young entrants are now a rarity and the average age of the full-time School Dentist is on the fifty mark.

The reasons for the avoidance of local authority work by young men are various and interesting, particularly as salaries now compare reasonably with other branches of the profession. Perhaps one reason is the hopeless feeling of trying to do the impossible, which is to keep children's teeth in their mouths and in decent condition. A good diet, a regular use of a toothbrush and regular inspection by a dentist in theory should do it, but the good diet has disappeared thanks to the flood of exhortations to eat munchies, scrunchies, bunchies and what have you, persistently plugged on the hoardings, in the cinemas, on the T.V. screens and in the press. The human tooth, evolved to deal with hard fibrous uncooked foods, can with difficulty stand up to a civilised diet, but when that diet is supplemented at every hour of the day by highly fermentable sweet stuffs, it quietly succumbs and the dentist, particularly the school dentist, faces an almost insoluble problem. The writer of this report recently observed on a Wallasey bus at nine in the morning a small girl of not more than three busily dealing with an enormous bar of chocolate. That child, typical of many, is likely at the age of six to have six or eight badly decayed baby molars, which will cause quite extensive pain and suffering for the child and a depressed and hopeless feeling in the dentist who has to deal with the situation.

This leads to another reason why the school dental service can be unattractive to young dentists, the large amount of extracting which has to be done. Teeth have to be extracted on occasions but it is not a pleasant business for young patients or the dentist who has to operate on them. A series of sessions week after week, devoted entirely to extracting teeth for young children under a general anaesthetic, can become nerve wracking, especially when some of the patients are little more than babies. It seems impossible to convince parents that their children are undergoing a minor operation under a general anaesthetic, something always to be avoided if possible. The preservation of teeth by means of

suitable fillings can do much to help, but unfortunately these days the rate of decay can be so rapid that it is difficult to catch teeth before they have decayed past the filling stage. The situation is not helped by the prejudice still present against fillings and the reluctance of parents to take children to the dentist until they have toothache, by which time extractions are the only possible treatment.

For a short time during and after World War II, there was a spectacular improvement in the condition of the teeth of the children of this country. War-time rationing may have been dull and meagre, but the effect on teeth at any rate was excellent, and this does give a clue as to something which can be done about the children's teeth. Parents have only to introduce their own rationing system and they can do more to keep their children's teeth in their mouths than all the dentists in the kingdom. No snacks between meals; a little reason and discipline on the subject of sweets and chocolates; a sharp eye on the toothbrush; a visit to a dentist at least once a year; it is as simple as that.

Unluckily like many simple things, the policy is difficult to carry out and apt to cause parents much unpopularity with friends, relations and the children themselves.

For those unable or unwilling to tackle the job, the only other possible preventive for dental decay in children would seem to be fluoridation — for prevention is the ideal to be aimed at — the dentist can only repair or replace. Fluorine is a substance present naturally in drinking water in certain areas of the British Isles, and observations have shown that where it is present, the amount of decay in children's teeth is something like half the "normal" for areas where it is absent. Experiments (some carried out in America and some being conducted now in England) have shown that where fluorine is added to drinking water, at a controlled rate, over the years the amount of decay in children's teeth drops accordingly. Protests have been made that harm may result, but there is no evidence of harm in the areas where the substance occurs naturally and no one has yet been able to assess the harm which can be done to a nervous and sensitive child who suffers repeatedly with toothache and is taken again and again to be anaesthetised and have teeth dragged out of its head.

Dentists and Children's dental clinics will always be necessary in countries with a high and artificial standard of living, but parental common sense and discipline plus fluoridation of water could reduce the need for them in quite a spectacular manner.

Notes on Physical Education (submitted by Mr. C. D. Clare, Organiser of Physical Education):—

All work has proceeded normally and the usual events and activities have taken place. I have therefore confined my remarks to three matters of general interest and concern.

In 1959, as in previous years, progress has been made in providing materials and facilities for Physical Education. Most

Primary Schools have now been equipped with some form of climbing and agility apparatus, though the full use of this apparatus and, indeed, the full implementation of a satisfactory Physical Education programme is largely dependent on the availability of adequate indoor accommodation.

It is not generally realised how much of the time allotted to Physical Education, in Primary Schools especially, may be lost through bad weather and ground surface conditions. Indoor facilities with space for children to move are essential, not only for the less vigorous activities of a corrective or remedial nature, but also to ensure the continuity of any scheme of work in Physical Education. Ideally, the school hall should be available, if required, for all Physical Education periods including games lessons, and only one class should be engaged in Physical Education at the same time. Whilst it will seldom be possible to achieve this ideal, two indoor periods per week would be a reasonable compromise and one indoor period a minimum allocation. Under present conditions of overcrowding there are still schools in Wallasey which cannot achieve this minimum.

There is one aspect of work in Physical Education, the results of which have generally become a cause of concern. I refer to the increase in variety of physical activities, especially those of a more individual nature, which are now included in the Physical Education programme of modern secondary schools. No longer are we restricted to gymnastics and the traditional team games. Swimming, athletics, tennis, badminton, rock climbing, hill walking, lightweight camping, canoeing, boxing, wrestling, judo and country dancing are among the activities now included, and much of the instruction is necessarily carried on voluntarily out of school hours by non-specialist teachers. Coupled with the varied school activities of a non-physical nature and the demands of examination work, it would appear that this spread of interests is increasingly taking up the spare time that teachers may reasonably be expected to devote to their pupils, and increasingly restricting their activities to their own schools. Though this is probably not the only reason, there would seem to be a tendency for less interest to be taken in competitive sport at higher levels. Whilst the chief purpose of Physical Education is to cater for the physical needs and aptitudes of every child, however physically inexperienced, the existence of facilities for competition and the possibility of being chosen to represent one's town or county forms a valuable incentive towards raising standards of performance. The organisation of such competitions has traditionally been the province of Sports Associations, voluntarily run by teachers. It is hoped that they will be given all possible support and encouragement to continue their activities.

SCHOOL MEALS SERVICE

Observations of Miss G. M. Dean, School Meals Organiser:—

Looking back over the year 1959, it would appear to have been one of slow and steady expansion of the School Meals Service.

The annual census of meals taken on a day in October gives 6,140 as the number of meals served to children and of these 789 were served free of charge to necessitous children. This is an increase of 225 over the number in 1958.

There has been no increase in the number of kitchen and dining centres except for a temporary dining centre at St. George's Road Huts opened to accommodate the children who were working at the Huts.

Improvements in equipment and dining room furniture continue to be made by replacing boilers and sterilising sinks with stainless steel ones and the lino-topped tables with those of polished wood or formica.

MEDICAL INSPECTION, 1959

MAINTAINED PRIMARY AND SECONDARY SCHOOLS

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Number of pupils on registers 16,255

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1955 and later	32	31	99.9	1	0.1
1954	246	245	99.6	1	0.4
1953	915	914	99.9	1	0.1
1952	81	81	100	—	—
1951	22	22	100	—	—
1950	25	25	100	—	—
1949	24	24	100	—	—
1948	512	512	100	—	—
1947	350	350	100	—	—
1946	75	75	100	—	—
1945	370	369	99.73	1	.27
1944 and earlier	1,121	1,118	99.73	3	.27
TOTAL	3,773	3,766	99.8	7	0.2

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT
PERIODIC MEDICAL INSPECTIONS
(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1955 and later	—	8	7
1954	15	82	77
1953	53	317	302
1952	6	23	25
1951	1	5	5
1950	2	3	5
1949	1	12	10
1948	63	125	158
1947	49	70	101
1946	12	19	22
1945	49	83	109
1944 and earlier	304	218	356
TOTAL	455	965	1,177

TABLE C.—OTHER INSPECTIONS

Number of Special Inspections	1,561
Number of Re-inspections	450
Total	2,011

TABLE D.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons ..	24,838
(b) Total number of individual pupils found to be infested ..	535
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—

PART II—DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

PART II TABLE A.—PERIODIC INSPECTIONS

Defect or Disease (2)	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
Skin	43	22	54	41	32	19	129	82
Eyes—(a) Vision	73	34	249	52	133	55	455	141
(b) Squint	29	9	12	6	16	13	57	28
(c) Other	8	7	8	10	11	4	27	21
Ears—(a) Hearing	5	56	6	10	4	20	15	86
(b) Otitis Media	20	30	2	7	4	9	26	46
(c) Other	32	17	34	9	19	4	85	30
Nose and Throat	66	207	18	56	28	70	112	333
Speech	18	19	9	1	10	11	37	31
Lymphatic Glands	1	45	—	3	—	10	1	58
Heart	3	8	4	25	4	20	11	53
Lungs	38	70	14	16	16	36	68	122
Developmental—								
(a) Hernia	6	15	2	1	1	8	9	24
(b) Other	8	70	5	28	11	33	24	131
Orthopaedic—								
(a) Posture	5	16	4	30	11	17	20	63
(b) Feet	68	41	51	31	50	20	169	92
(c) Other	25	28	33	38	11	42	69	108
Nervous System—								
(a) Epilepsy	3	8	1	3	2	1	6	12
(b) Other	4	6	13	5	3	12	20	23
Psychological—								
(a) Development	25	5	6	4	10	32	41	41
(b) Stability	11	21	1	11	3	8	15	40
Abdomen	8	9	—	4	—	1	8	14
Other	3	—	5	—	8	—	16	—

PART II TABLE B.—SPECIAL INSPECTIONS

Defect or Disease (2)	SPECIAL INSPECTIONS	
	Pupils requiring Treatment (3)	Pupils requiring Observation (4)
in	75	7
ees—(a) Vision	39	6
(b) Squint	4	—
(c) Other	69	10
rs—(a) Hearing	14	1
(b) Otitis Media	5	1
(c) Other	96	9
ose and Throat	73	13
eech	23	2
ymphatic Glands	1	—
art	3	—
ings	27	9
velopmental—		
(a) Hernia	1	—
(b) Other	5	2
hopaedic—		
(a) Posture	6	1
(b) Feet	71	7
(c) Other	66	9
rvous System—		
(a) Epilepsy	—	—
(b) Other	18	6
ychological—		
(a) Development	8	1
(b) Stability	4	—
domen	6	2
ner	410	30

TREATMENT OF PUPILS ATTENDING MAINTAINED
AND ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)

PART III TABLE A.—EYE DISEASES, AND DEFECTIVE VISION
AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	188
Errors of refraction (including squint)	1,826
Total	2,014
Number of pupils for whom spectacles were prescribed	1,002

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	3
(b) for adenoids and chronic tonsillitis	226
(c) for other nose and throat conditions	2
Received other forms of treatment	139
Total	370
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1959	1
(b) in previous years	7

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments	1,345
(b) Pupils treated at school for postural defects	23
Total	1,368

TABLE D.—DISEASES OF THE SKIN

(excluding uncleanliness, for which see Table D of Part I)

	Number of cases known to have been treated
Ringworm—(a) Scalp	—
(b) Body	—
Scabies	2
Impetigo	43
Other skin diseases	123
Total	168

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	87

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated
Received regular treatment	108
Received treatment at irregular intervals	120
Total pupils treated by Speech Therapist	<hr/> 228 <hr/>

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	1,407
(b) Pupils who received convalescent treatment under School Health Service arrangements	4
(c) Pupils who received B.C.G. vaccination ...	1,061
(d) Other than (a), (b) and (c) above.	
Carbon Dioxide treatment—warts	168
veruccae	89
Hospital In-patient treatment—Medical	155
.. .. —Surgical	67
.. .. —Orthopaedic	32
Total (a)—(d)	<hr/> 2,983 <hr/>

PART IV.—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

1) Number of pupils inspected by the Authority's Dental Officers: —	
(a) At Periodic Inspections	4,809
(b) As Specials	2,032
Total (1)	<hr/> 6,841 <hr/>
2) Number found to require treatment	4,555
3) Number offered treatment	4,422
4) Number actually treated	3,567
5) Number of attendances made by pupils for treatment, including those recorded at 11(h)	7,783
6) Half days devoted to—	
(a) Periodic (School) Inspection	52
(b) Treatment	1,635
Total (6)	<hr/> 1,687 <hr/>
7) Fillings: (a) Permanent Teeth	2,999
(b) Temporary Teeth	101
Total (7)	<hr/> 3,100 <hr/>

(8) Number of Teeth Filled: (a) Permanent Teeth	...	...	2,823
(b) Temporary Teeth	...	...	100
Total (8)			2,923
(9) Extractions: (a) Permanent Teeth	...	...	1,316
(b) Temporary Teeth	...	...	1,867
Total (9)			3,183
(10) Administration of general anaesthetics for extraction			2,003
(11) Orthodontics:			
(a) Cases commenced during the year	...	...	10
(b) Cases carried forward from previous year	...	...	9
(c) Cases completed during the year	...	...	10
(d) Cases discontinued during the year	...	...	8
(e) Pupils treated with appliances	...	...	80
(f) Removable appliances fitted	...	...	13
(g) Fixed appliances fitted	...	...	3
(h) Total attendances	...	...	151
(12) Number of pupils supplied with artificial teeth	...	...	24
(13) Other operations: (a) Permanent teeth	...	...	1,464
(b) Temporary teeth	...	...	4
Total (13)			1,468

MINOR AILMENTS AND OTHER CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey	Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ..	Minor Ailments and S.M.O.'s Clinic
	(p.m.)	—	—
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey	S.M.O.'s Clinic and Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments and S.M.O.'s Clinic
		Child Welfare Centre, Water Street, Wallasey ..	—
	(p.m.)	School Clinic, Merton Road, Wallasey	—
		Other Clinics	—

Wednesday	(a.m.)	School Clinic, Merton Road, Wallasey	Ophthalmic Clinic (Dr. Edwards) (Fortnightly)
		Child Welfare Centre, Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ..	Ophthalmic Clinic (Dr. Edwards) (Fortnightly)
	(p.m.)	School Clinic, Merton Road, Wallasey	Minor Ailments
		Child Welfare Centre, Moreton	Immunisation (1st and 3rd Wednesday of each month)
		Child Welfare Centre, Water Street, Wallasey ..	—
Thursday	(a.m.)	School Clinic, Merton Road, Wallasey	—
		Child Welfare Centre, Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey ..	—
	(p.m.)	School Clinic, Merton Road, Wallasey	Minor Ailments
		Child Welfare Centre, Moreton	Orthopaedic Specialist's Clinic (Mr. Davies), (Except every 4th Thursday)
		Child Welfare Centre, Water Street, Wallasey ..	do. (every 4th Thursday)
Friday	(a.m.)	School Clinic, Merton Road, Wallasey	—
		Child Welfare Centre, Moreton	Ophthalmic Clinic (Dr. Edwards)
		Child Welfare Centre, Water Street, Wallasey ..	Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey	Minor Ailments
		Child Welfare Centre, Moreton	S.M.O.'s Clinic (as required)
		Child Welfare Centre, Water Street, Wallasey ..	Immunisation (Fortnightly)
Saturday	(a.m.)	—	—

SPEECH THERAPY CLINICS

Monday	(a.m.)	Vaughan Road J. M. School, Wallasey
	(p.m.)	Clare Mount School, Wallasey
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey
	(p.m.)	School Clinic, Merton Road, Wallasey
Wednesday	(a.m.)	Child Welfare Centre, Water Street, Wallasey
	(p.m.)	Elleray Park School, Wallasey
Thursday	(a.m.)	School Clinic, Merton Road, Wallasey
	(p.m.)	School or Home visits
Friday	(a.m.)	Child Welfare Centre, Water Street, Wallasey
	(p.m.)	Child Welfare Centre, Oakenholt Road, Moreton

PHYSIOTHERAPY CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey (U.V.L. and R.E. and Individual Treatments) Child Welfare Centre, Oakenholt Road, Moreton (R.E. and U.V.L.)
	(p.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Individual Treatments) Child Welfare Centre, Oakenholt Road, Moreton. (U.V.L. and R.E.)
Tuesday	(a.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Remedial Exercises) Congregational Church Hall, Princess Road, Wallasey (Individual and Group Treatments)
	(p.m.)	School Clinic, Merton Road, Wallasey (Remedial Exercises) Child Welfare Centre, Oakenholt Road, Moreton (Individual Treatments and R.E.)
Wednesday	(a.m.)	School Clinic, Merton Rd., Wallasey (U.V.L. and Individual Treatments) Elleray Park Special School, Elleray Park Road, Wallasey (Individual Treatments)
	(p.m.)	Child Welfare Centre, Water Street, Wallasey (Remedial Exercises) School Clinic, Merton Rd., Wallasey (U.V.L. and Individual Treatments)

Thursday	(a.m.)	Elleray Park Special School, Wallasey (Remedial Exercises) Child Welfare Centre, Oakenholt Road, Moreton (U.V.L.)
	(p.m.)	School Clinic, Merton Road, Wallasey (Orthopaedic Specialist's Clinic) Child Welfare Centre, Oakenholt Road, Moreton (Orthopaedic Specialist's Clinic once per month)
Friday	(a.m.)	Elleray Park Special School, Elleray Park Road, Wallasey (Remedial Exercises) School Clinic, Merton Rd., Wallasey (U.V.L. and Individual Treatments)
	(p.m.)	Grosvenor Assembly Rooms, Grosvenor St., Wallasey (Remedial Exercises) School Clinic, Merton Road, Wallasey (Remedial Exercises)

SCHOOL DENTAL CLINICS

Monday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Moreton
Tuesday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey. School Clinic, Merton Road, Wallasey
Wednesday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton
Thursday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton
Friday	(a.m.)	Child Welfare Centre, Oakenholt Rd., Moreton School Clinic, Merton Road, Wallasey Child Welfare Clinic, Water Street, Wallasey School Dental Clinic, 47 Liscard Village., Wallasey
	(p.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey Child Welfare Centre, Oakenholt Rd., Moreton Child Welfare Clinic, Water Street, Wallasey
Saturday	(a.m.)	School Dental Clinic, 47 Liscard Village, Wallasey School Clinic, Merton Road, Wallasey

CHILD GUIDANCE CLINIC

(Psychiatric Department)

50, Church Street, Wallasey, Dr. G. Egan, M.D., Ch.B., D.P.M.,
Tuesday afternoons and Thursday afternoons

HANDICAPPED PUPILS—YEAR 1959

Details	Blind	Partially Sighted	Deaf	Partially Deaf	Delicate	Physically Handicapped	Educationally Sub-Normal	Mal-adjusted	Epileptic	Total
in Special or Boarding ...	—	—	—	—	7	10	29	1	1	48
newly assessed in education	—	—	—	—	7	10	32	2	1	52
in Special Schools or Boarding Homes ...	—	—	—	—	7	10	32	2	1	52
on the Register of Special Pupils ...	—	1	2	6	40	57	113	—	2	221
Boarding Pupils ...	—	3	2	—	1	1	2	5	1	15
in Independent Schools under arrangements made by authority (other than b and c) ...	—	—	—	—	—	—	—	1	—	1
and in Homes other than at b) ...	—	—	—	—	—	—	—	—	—	—
Total (C) ...	—	4	4	6	41	58	115	6	3	237
receiving Education under arrangements made under the Education Act 1944:—	—	—	—	—	—	—	—	—	—	—
in Hospitals ...	—	—	—	—	—	—	—	—	—	—
in Homes ...	—	—	—	—	2	6	—	—	—	8
in places in Special Schools at ...	—	—	—	—	—	—	—	—	—	—
Boarding ...	—	—	—	—	—	—	2	1	—	3
Total ...	—	—	—	—	—	—	2	1	—	3

Number of children reported during the year:—

(a) Under Sec. 57(3) ... 4

(b) „ „ 57(4) ... 1

(c) „ „ 57(5) ... 2

of the Education Act, 1944.

